

HURON LODGE

EMERGENCY PREPAREDNESS PLAN

2022

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Introduction

Welcome to the Huron Lodge Emergency Preparedness Plan.

The purpose of this manual is to direct staff in implementing operational standards within the home.

Our policies set out the expectations and requirements that are essential to delivering quality care, safety and quality of life to our residents.

These policies articulate operational expectations and requirements that are applicable to our services.

Our policies have been written to meet applicable legislative, accreditation, and professional standards.

All policy manuals will be re-evaluated on an ongoing basis.

Organization of this Manual

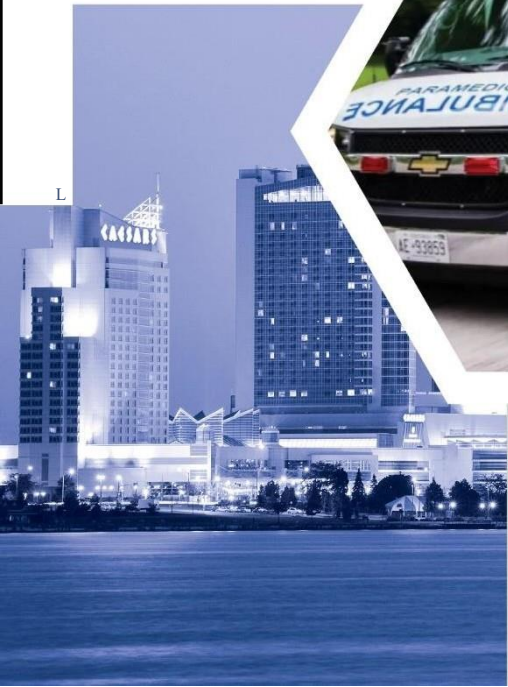
This manual has been designed using clear language and easy to read design.

Policies and procedures are organized by tabs identified in the Table of Contents.

The manual has been designed to identify all emergencies , codes and plans to address them as per standards.



EMERGENCY RESPONSE PLAN



As Approved by CRII0/2020
By-Law 98-2005 As Amended



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Revision History

Revision Number	Revised by	Changes	Revision Date
1	Deputy of Support Services, WFRS	Complete revision	April 20, 2015
2	Emergency Planning Officer, WFRS	Complete revision	March 2, 2020

1.0 Emergency Response Plan Overview

The Emergency Management and Civil Protection Act (EMCPA) defines an “emergency” as a situation or an impending situation that constitutes a danger of major proportions that could result in serious harm to persons or substantial damage to property and that is caused by forces of nature, disease or other health risk, an accident or an act whether intentional or otherwise.

Emergencies require a coordinated response by a number of organizations, both governmental and private, under the direction of the appropriate elected and senior municipal officials.

1.1 Aim

As per the EMCPA, the City of Windsor has formulated this Emergency Response Plan (ERP), which was adopted by Council as By-Law 98-2005.

The aim of the City of Windsor’s ERP is to make provision for the extraordinary arrangements and measures that may have to be taken to protect the health, safety, welfare, environment and economic health of the residents, businesses and visitors of the City of Windsor when faced with an emergency.

1.2 Legal Authorities

The legislation under which the City and its employees are authorized to respond to an emergency are:

- Emergency Management and Civil Protection Act, R.S.O. 1990, c. E.9
- Ontario Regulation 380/04
- By-Law 98-2005

1.3 Plan Maintenance

Windsor Fire & Rescue Services (WFRS) is responsible for maintaining the City’s ERP.

The ERP and related plans and protocols are reviewed annually by the City’s Emergency Management Program Committee (EMPC).

Additionally, plans are re-evaluated to ensure currency when any of the following occurs:

- Legislative and regulatory changes
- New hazards are identified or existing hazards change
- Resource or organizational structure change
- After exercises
- After emergency/disaster response
- Infrastructural, economic and/or political changes

Appendices and annexes do not form part of the ERP as they may be confidential and provide more detailed relevant information that may require frequent updating, be of technical nature, or contain sensitive or personal information that could pose a security threat or violate privacy legislation if released. A copy of all appendices and annexes are available at the City's Emergency Operations Centre (EOC) for use by the City's Community Control Group (CCG) and support/advisory staff.

1.3.1 Council Approval

Where significant portions of the City's ERP are revised, City Council is required to adopt the plan by by-law. Smaller revisions as well as revisions of appendices may be made by the EMPC or WFRS.

1.3.2 Plan Distribution

The most current version of the ERP is available on the City of Windsor website (www.citywindsor.ca).

Additionally, a copy of the ERP can be viewed at WFRS Headquarters.

As per the EMCPA, a copy of the ERP or any revisions will be submitted to the Office of the Fire Marshall and Emergency Management (OFMEM).

1.4 Training and Exercises

Responding personnel are required to maintain competency with respect to their designated areas of responsibility and assigned tasks. Ongoing training and exercises with the aim of maintaining competency are standard practice. The City of Windsor maintains an exercise program in order to meet legislative requirements. As required by the EMCPA, the City's ERP will be tested in whole or in part at minimum on an annual basis.

1.5 Emergency Management Program Committee

The City will maintain an Emergency Management Program Committee (EMPC) as required by the EMCPA. The Chief Administrative Officer (CAO) may appoint members of the committee without council approval.

2.0 Declaration / Termination of an Emergency

2.1 Action Prior to a Declaration

When an emergency exists or appears to be imminent, but has not yet been declared, City employees have a responsibility to take such actions under this ERP as may be necessary to help protect the lives and property of the inhabitants of the City of Windsor.

The EOC may be activated for any emergency for the purposes of managing an emergency, maintaining services to the community and supporting the emergency site.

2.2 Declaration of an Emergency

The Mayor or Acting Mayor, as Head of Council, is responsible for declaring an emergency. This decision is made in consultation with the Community Emergency Management Coordinator (CEMC) and the CCG and is guided by information and considerations contained within *Appendix 2*. Upon such declaration, the Mayor will notify the following parties:

- OFMEM
- City Council
- Public
- Neighbouring community officials (both Canadian and American)
- Local Members of Provincial Parliament
- Local Members of Parliament

2.3 Termination of an Emergency

A community emergency may be terminated at any time by the:

- Mayor or Acting Mayor; or
- City Council; or
- The Premier of Ontario.

When terminating an emergency, the Mayor or Acting Mayor will notify the following parties:

- OFMEM
- City Council
- Public
- Neighbouring community officials (both Canadian and American)
- Local Members of Provincial Parliament
- Local Members of Parliament

2.4 Requests for Assistance

Assistance from other municipalities may be requested through their respective Head of Council and/or their CEMC. The request shall not be deemed a request that the County or Municipality assume authority and control of the emergency.

The assistance of Federal and Provincial Ministries may be requested at any time without any loss of control or authority via the OFMEM through the Provincial Emergency Operations Centre (PEOC) by the CEMC.

3.0 Emergency Notification Procedures

The executive authority for the management and mitigation of a potential or declared emergency lies with the CCG. Upon receipt of a warning of a real or potential emergency, the affected department will immediately contact the CEMC via the WFRS Emergency Communications Centre to inform the CEMC of the nature of the real or potential emergency.

The CEMC will consult with the Chief Administrative Officer (CAO) to determine what actions are required. If deemed necessary, the CEMC or designate will notify WFRS Emergency Communication Centre to start the notification procedure of all CCG members. Upon notification, it is the responsibility of the CCG members to implement their own internal notification procedures notifying their required support staff and volunteer organizations.

City of Windsor subordinate plans annexed to this ERP may be implemented at anytime in whole or in part as required. The contact information of the CCG members and their alternates are contained within *Appendix 1*.

3.1 Notification Levels

Most emergencies are managed on scene by emergency services and other city departments and are considered routine operations. When emergencies of greater magnitude occur, they require an emergency management response structure beyond normal daily operations. The following response levels are to be used as a guide before, during and following emergencies. Each level signifies the variation of the impact to the community caused by the major incident or emergency.

Response Level	Actions	Criteria	Examples
Normal Operations	Normal response by operating departments and responders	Routine operations	Small car accident, isolated flooding, small power outage, house fire
Level 1: Enhanced monitoring level	CCG members are notified and on standby CCG members monitoring incident	Minor impact to citizens and environment Minor impact on resources	Apartment fire with displacements, contained hazmat, predicted significant weather event (flood, tornado, ice storm, etc.)
Level 2: Partial notification/activation of CCG/EOC	CCG responds to EOC PEOC may be notified	Significant impact to citizens, property and environment Significant media attention Significant demand on resources	Chemical spill, multiple fire locations, multiple suspects/active threat, boil water advisory, significant weather event (flood, tornado, ice storm, etc.)
Level 3: Full notification/activation of CCG/EOC	Municipal emergency declared by Mayor PEOC notified	Major impact to citizens, property and environment Major media and/or public interest Major demand on resources	Ice storm, tornado, large scale flood, chemical spill, commercial airliner crash, train derailment, large propane explosion, pipeline leakage, potable water emergency, epidemic, terrorism

3.2 EOC Operations

Primary EOC	Alternate EOC	Tertiary EOC
<i>Fire Station 6/EOC</i> 1587 Provincial Rd. Windsor, Ontario	<i>Crawford Yard</i> <i>Administrative Building</i> 1531 Crawford Ave. Windsor, Ontario	<i>Essex County Civic & Education Centre</i> 360 Fairview Ave. W. Essex, Ontario

For more information regarding the EOC facility including staffing, physical layout, equipment and resources, refer to the EOC Manual *Appendix 6*.

The EOC may function with only a limited number of persons depending on the emergency. Operations within the EOC may not require the entirety of the CCG, however all members of the CCG must be notified of the EOC activation.

4.0 Incident Management System

The City of Windsor uses the Incident Management System (IMS), a standardized approach to emergency management that encompasses personnel, facilities, equipment, procedures and communications operating within a common organizational structure. The five major sections of the IMS (Management Team, Operations, Planning, Logistics, and Finance/Administration) can be expanded or contracted to meet requirements as an event progresses or digresses.

The primary responsibilities of each of these functions are:

EOC Management: Responsible for overall policy and coordination through the joint efforts of government agencies and private organizations. Management includes the EOC Incident Commander, Site Incident Commander, Community Control Group, Emergency Information Officer (EIO), Safety Officer and Liaison Officer.

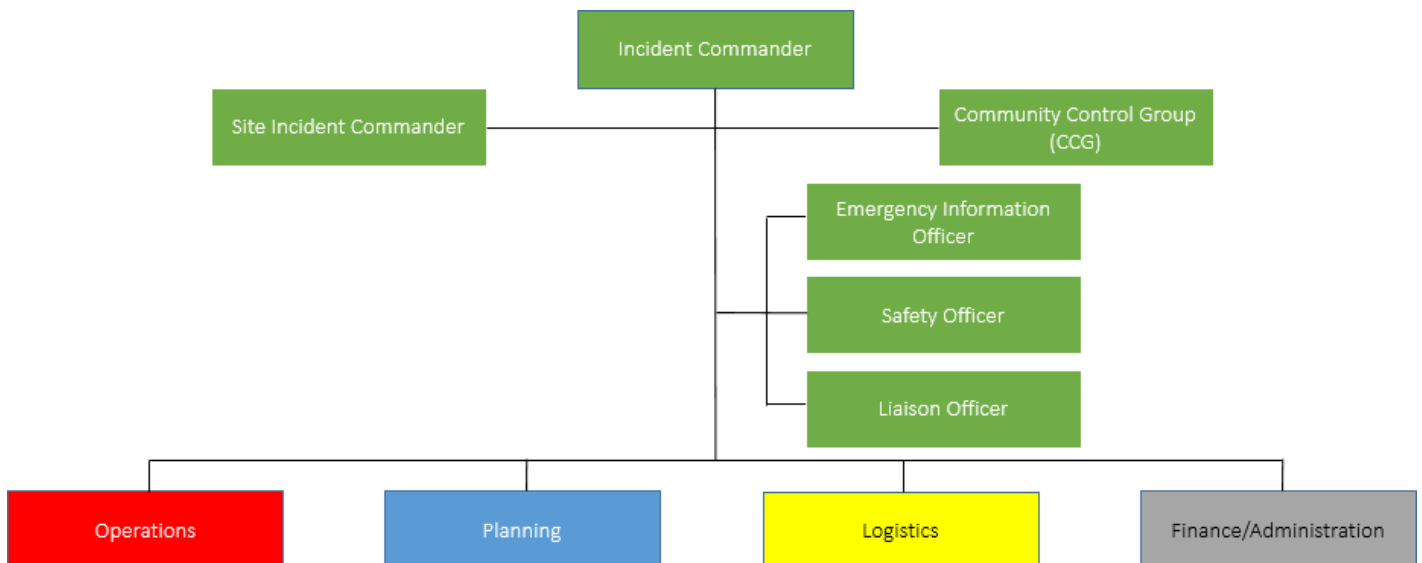
Operations: Responsible for coordinating all jurisdictional operations in support of the emergency response through implementation of the EOC Incident Action Plan (IAP).

Planning: Responsible for collecting, evaluating and disseminating information; developing the EOC’s IAP and Situation Report in conjunction with other functions; and maintaining EOC documentation.

Logistics: Responsible for ensuring the EOC is operational and providing facilities, services, personnel, equipment and materials to the site and EOC.

Finance/Administration: Responsible for financial activities and other administrative aspects.

4.1 IMS Organization Chart for the EOC



4.2 EOC Operations

Members of the CCG will gather at regular intervals during the emergency to inform each other of actions taken and problems encountered. The Incident Commander (IC) will establish the frequency of meetings and agenda items. Meetings will be kept as brief as possible and occur by electronic conferencing when appropriate thus allowing members to carry out their individual responsibilities. IMS forms track incident information and actions taken. IMS form can be found in *Appendix 3*.

4.2.1 Relationship between EOC IC and CCG

Depending on the nature of the emergency and once the EOC IC has been assigned, the CCG is to offer support to the EOC IC with equipment, staff and other resources as required.

The CCG will ensure that the rest of the community maintains municipal services.

4.3 Site Incident Command

During any incident, emergency responders (Fire, Police and EMS) will establish an Incident Commander at the site where the emergency exists. They will work together to protect the life, health, safety and property of both the public and emergency response personnel. Emergency site operations are typically organized under the IMS as a recognized command structure for the incident to make the most efficient use of personnel and equipment. Upon activation of the ERP, the emergency site operations will be supported by the EOC.

The site IC is responsible for taking overall responsibility for managing the incident, and providing the overall leadership for incident response. Having assumed command, the site IC should ensure that all response organizations that are likely to be involved are advised of the incident. Command must be established in an unmistakable fashion at the beginning of the incident and maintained until the end of the incident.

The Command Post is a mobile unit that can be provided to the site if deemed necessary and is the location from which the site IC oversees incident management and on-site operations. It is positioned outside of the present and potential hazard zone, but close enough to the incident to maintain command.

4.3.1 Relationship between Site IC and Command including control structures of emergency responders

The senior representative for each emergency response agency (Police, Fire, EMS, Operations / Public Works) at the site will consult with the site IC to offer a coordinated and unified effective response utilizing the IMS.

The Site IC will follow the appropriate protocols and processes under the IMS and communicate the IAP to the EOC IC or the CCG.

5.0 Community Control Group / EOC Support Staff

5.1 Community Control Group Members

The EOC will be directed by the CCG (equivalent to the Municipal Emergency Control Group) – a group of officials who are responsible for coordinating the provision of essential services necessary to minimize the effects of an emergency on the community.

The CCG consists of the following officials:

1. Mayor of the City of Windsor
2. Chief Administrative Officer (CAO)
3. Community Emergency Management Coordinator (CEMC) / Fire Chief
4. Chief of Police
5. Essex-Windsor Emergency Medical Services (EMS) Chief
6. Corporate Leader of Parks, Recreation, Culture and Facilities
7. Chief Financial Officer / City Treasurer
8. City Engineer
9. Community Development and Health Commissioner
10. City Clerk / License Commissioner
11. City Solicitor

5.1.2 Responsibilities of the CCG

All CCG members shall assist in the mitigation of the incident by fulfilling all required roles in the IMS and maintaining operational capabilities relative to all areas of responsibility and provide technical assistance to the EOC in their area of expertise.

All members shall:

- Immediately contact the CEMC via the WFRS Emergency Communications Centre to inform the CEMC of the nature of the real or potential emergency
- Be trained in IMS and fill a role under IMS structure as required
- Manage operational staffing levels within their operational areas of responsibility
- Ensure Business Continuity Plans (BCP) are implemented for their respective areas as required
- Ensure the appropriate IMS forms are completed in the respective areas, hand in all IMS forms and participate in a debriefing prior to leaving the EOC
- Maintain a personal log outlining decisions made and actions taken and submit a summary of the log to the CEMC within two weeks of the deactivation of the EOC
- Coordinate and direct their service and provide actions necessary for the mitigation of the effects of the emergency, provided they are not contrary to law
- Determine if the location and composition of the CCG are appropriate
- Advise the Mayor as to whether the declaration of an emergency is recommended
- Advise the Mayor on the need to designate all or part of the city as an emergency area

- Provide support to the emergency site(s) by providing equipment, staff and resources as required
- Ensure pertinent information regarding the emergency is promptly forwarded to the EIO and the Manager of the Customer Contact Centre for dissemination to the media and public
- Determine the need to establish advisory groups and or sub-committees / working groups for any aspect of the emergency including recovery
- Authorize expenditure of money required for dealing with the emergency as appropriate
- Notify the service, agency or group under their direction of the termination of the emergency
- Consider applications for Municipal Disaster Recovery Assistance (MDRA)

5.2 Individual Responsibilities of the CCG

Examples of responsibilities include but are not limited to:

5.2.1 Mayor of the City of Windsor

- Consult with the CAO, CEMC and *Appendix 2* regarding declaring and terminating an emergency
- Declare an emergency within the designated area if appropriate
- Declare the termination of an emergency (City Council or the Premier of Ontario also has this ability)
- Notify the OFMEM, City Council, Public, neighbouring communities (both Canadian and American), Local Member of Provincial Parliament and Local Members of Parliament of the declaration and termination of an emergency
- Work in conjunction with the EIO to provide accurate and timely information to the media and public

5.2.2 Chief Administrative Officer

- Consult with the CEMC regarding the need to activate the EOC
- In consultation with the CEMC, activate the Emergency Notification System through WFRS Emergency Communications Centre to start the notification procedure of the CCG
- Advise the Mayor on policies and procedures, as appropriate
- In conjunction with the Mayor and CCG, approve major announcements and media releases prepared by the EIO and the Manager of the Customer Contact Centre
- Approve emergency expenditures

5.2.3 CEMC / Fire Chief

- Consult with the CAO regarding the need to activate the EOC
- Activate the Emergency Notification System through WFRS Emergency Communications Centre to start the notification procedure of the CCG
- Activate and arrange the EOC
- Ensure suitable back-up facilities are available and designated should the primary EOC not be available or suitable to be activated
- Ensure that security is in place for the EOC and registration of CCG members

- Provide members of the CCG with the necessary plans, resources, supplies, maps, radios and equipment
- Provide advice and clarification regarding the implementation of the ERP
- Liaise with community support agencies
- Ensure that the IMS is established and utilized
- Ensure that the operating cycle is met by the CCG and related IMS documentation is maintained and stored for future reference
- Address any action items that may result from the activation of the ERP and keep the CCG informed of implementation needs
- Provide the EOC with information and advice on firefighting, rescues and hazardous materials or other public safety matters
- Depending on the nature of the emergency, assign and maintain communication with the Site IC and utilize the Command Post when applicable
- Inform the Mutual Aid Fire Coordinator of the emergency situation and / or initiate mutual aid arrangements for the provision of additional firefighters and equipment
- Determine the need for specialized equipment and / or resources either locally, provincially or federally
- Provide assistance to other departments and agencies and contribute to non-firefighting operations where necessary

5.2.4 Chief of Police

- Ensure the protection of life, property and the provision of law and order
- Notify the necessary emergency and community services
- Depending on the nature of the emergency, assign and maintain communication with the site IC and utilize the Command Post when applicable
- In accordance with the EIO, alert persons endangered by the emergency and assist in coordinating reception / evacuation procedures
- Provide police service in the EOC, reception / evacuation centres, morgues and other facilities
- Notify the Coroner of fatalities
- Liaise with other community, provincial and federal police agencies

5.2.5 Essex-Windsor Emergency Medical Services (EMS) Chief

- Liaise with the Medical Officer of Health on areas of mutual concern
- Coordinate efforts with Salvation Army, Red Cross and / or any other partnered group that may assist in providing a service to meet their objectives
- Liaise with Homes for the Aged and Nursing Homes

5.2.6 Corporate Leader of Parks, Recreation, Culture and Facilities

- Maintain operations capabilities relative to all areas of responsibility
- Provide technical assistance in areas of expertise to the EOC such as Forestry, Municipal Facilities, etc.
- Coordinate in conjunction with the Community Development and Health Commissioner for the use of City recreational centres/buildings for evacuation and visitor purposes

5.2.7 Chief Financial Officer / City Treasurer

- Provide oversight for the service areas reporting to them
- Provide purchasing advice to the CCG in alliance with the Purchasing By-law (*Appendix 4*)
- Liaise with the Treasurers / Directors of Finance from neighbouring communities
- Ensure that records of expenses are maintained for future claim purposes
- Ensure the prompt payment and settlement of all the legitimate invoices and claims incurred during an emergency

5.2.8 City Engineer

- Maintain operations capabilities relative to all areas of responsibility
- Provide technical assistance in areas of expertise to the EOC
- Assist with acquiring any mapping that may be used in the EOC

5.2.9 Community Development and Health Commissioner

- Develop, maintain and implement the Community Development & Health Services Emergency Response Plan *Annex Q*
- Ensure the well-being of Windsor and Essex County residents who have been displaced from their homes by arranging for registration and the provision of basic needs such as emergency shelter, food and other personal needs as required
- Liaise with CEMCs in Windsor and Essex County to select sites which could serve as Reception Centres and/or Emergency Shelters – Refer to *Appendix 8 and 9*
- Manage the opening and operating of reception centre(s) and/or evacuation centre(s) and coordinate services with the Canadian Red Cross and other community partners as required
- Ensure the continuation of essential departmental services to the public during an emergency

5.2.10 City Clerk / License Commissioner

- Provide oversight for the service areas reporting to them
- Ensure that all city human resource activities are coordinated through the Executive Director of Human Resources
- Upon direction by the Mayor, City Clerks / Council Services will ensure that all Councillors are advised of the declaration and termination of an emergency
- Upon direction by the Mayor, City Clerks / Council Services will arrange special meetings of Council if deemed necessary

5.2.11 City Solicitor

- Provide oversight for the service areas reporting to them
- Provide information, recommendations and clarity to the CCG regarding legal matters as they apply to the actions and decisions of the group during the response to an emergency

5.4 EOC Support Staff

The EOC Support Staff includes additional personnel that may be called to respond to the EOC including City of Windsor Departments, OFMEM, Ontario Provincial Police (OPP), local hospital representatives, Windsor Port Authority, ENWIN, liaison staff from provincial ministries and any other officials, experts or representatives from the public or private sector as deemed necessary.

6.0 Internal and External Communications

During an emergency, the City of Windsor is committed to providing accurate and timely information to staff, other levels of government, key stakeholders and community agencies, the general public and the media.

6.1 Internal Communications

During a significant event or declared emergency, City of Windsor employees may be directed to attend work, work from another location, or work from home depending on the situation. Employees are required to verify the expectation and keep informed on the status of the emergency through telephone and email messages.

6.2 External Communications

External communications utilize a variety of media including social media and the City's website.

6.2.1 Media Inquiries

All media requests for information concerning the emergency shall be referred to the EIO who will arrange all media opportunities with a designated spokesperson(s).

When other jurisdictions and agencies are involved in an event or situation, the EIO will ensure there is a joint coordination of media releases and press conferences.

6.2.2 Media Centre

The EIO is responsible for establishing a Media Centre where all media briefings and press conferences are to be coordinated.

7.0 Resource Management

It is important to identify the resources utilized to manage the emergencies identified in this plan and the most effective method of acquiring these resources in a timely manner.

7.1 Volunteer Management

Volunteers are generally coordinated through community partners such as Canadian Red Cross and St. John Ambulance.

7.2 Provincial Assistance

Head of Council, upon consultation with the CEMC and CCG may request assistance from the Province of Ontario at any time without any loss of control or authority. This request is made by contacting the PEOC.

When requested by the City, the OFMEM may send a Field Officer to provide provincial liaison and advice on provincial matters.

7.2.1 Role of the Premier of Ontario

Under Section 7 of the Act, the Premier of Ontario may:

- Declare that an emergency exists throughout Ontario or in any part thereof and may take such action and make such orders as he or she considers necessary and are not contrary to law to implement the emergency plan and to protect property and the health, safety and welfare of the inhabitants of the emergency area and
- Exercise any power or perform any duty conferred upon a Minister of the Crown or a Crown employee by or under an Act of Legislature and
- Where a declaration is made and the emergency area or any part thereof is within the jurisdiction of a municipality, the Premier of Ontario may, where he or she considers it necessary, direct and control the administration, facilities and equipment of the municipality to ensure the provision of necessary services in the emergency area and without restricting the generality of the foregoing, the exercise by the municipality of its power and duties, in the emergency area, whether under an emergency plan or otherwise is subject to the direction and control of the Premier, and
- Require any municipality to provide such assistance as he or she considers necessary to an emergency area or any part thereof that is not within the jurisdiction of the municipality and may direct and control the provision of such assistance.

7.3 Federal Assistance

The Federal Government has developed the Federal Emergency Response Plan (FERP) to harmonize emergency response efforts by the Federal and Provincial / Territorial Governments, Non-Governmental Organizations and the private sector.

Requests for personnel or resources from the Federal Government are made through the PEOC.

8.0 Recovery and Post Incident Activities

8.1 Recovery

Recovery involves all actions taken to recover from the incident. Some recovery strategies are already initiated while the incident is occurring while other strategies are initiated as soon as the recovery phase is announced.

With the restoration of utilities, services and other infrastructure, the City begins to return to a state of normalcy. Other recovery activities include long-term debris management, inspection services, redevelopment and facility reconstruction.

8.2 Debriefing

A debriefing is a meeting of key officials from responding organizations to formally discuss issues of mutual interest pertaining to a major incident or emergency. It provides an opportunity for organizations and departments involved in emergency management post-disaster to review the lessons learned.

8.3 After Action Report

A formal After Action Report (AAR) will be completed after any major incident or emergency involving the operation of the EOC. It will include events of the incident, the operational impacts, concerns and issues, associated costs and recommendations and findings from the debriefings. This report will be utilized when evaluating deficiencies in the ERP and related plans and procedures. Changes will be made to all documents if necessary.

8.4 Compensation for Losses

The Municipal Disaster Recovery Assistance (MDRA) program is in place to help municipalities address extraordinary emergency response costs and damage to essential property or infrastructure such as bridges, roads and public buildings as a result of a natural disaster.

The Disaster Recovery Assistance for Ontarians (DRAO) program may assist individuals, small businesses, farmers, and not-for-profit organizations who have experienced damage to, or loss of, essential property as a result of a natural disaster.

9.0 Acronyms

AAR	After Action Report
BCP	Business Continuity Plan
CAO	Chief Administrative Officer
CCG	Community Control Group
CEMC	Community Emergency Management Coordinator
DRAO	Disaster Recovery Assistance for Ontarians
EIO	Emergency Information Officer
EMCPA	Emergency Management and Civil Protection Act
EMPC	Emergency Management Program Committee
EMS	Emergency Medical Services
ERP	Emergency Response Plan
EOC	Emergency Operations Centre
FERP	Federal Emergency Response Plan
HIRA	Hazard Identification and Risk Assessment
IAP	Incident Action Plan
IC	Incident Commander
IMS	Incident Management System
MDRA	Municipal Disaster Recovery Assistance
OFMEM	Office of the Fire Marshal and Emergency Management
OPP	Ontario Provincial Police
PEOC	Provincial Emergency Operations Centre
WFRS	Windsor Fire Rescue Services
WPS	Windsor Police Service

10.0 Appendices

Appendix	Name
Appendix 1	Emergency Response Contact List
Appendix 2	Checklist in Consideration of a Declaration of Emergency
Appendix 3	IMS Forms Package
Appendix 4	Purchasing By-Law 93-2012
Appendix 5	Emergency Management and Civil Protection Act
Appendix 6	EOC Manual
Appendix 7	Dispatch Emergency Notification Procedures
Appendix 8	Reception Centres/Emergency Shelters Map – Windsor
Appendix 9	Reception Centres/Emergency Shelters Map – Essex County

11.0 Annexes

Annex	Name
Annex A	Community Risk Profile
Annex B	HIRA
Annex C	Emergency Resource Handbook
Annex D	Evacuation Plan
Annex E	City of Windsor Flood Response Plan
Annex F	Essex County Mutual Aid Plan
Annex G	Spill & Complaint Response Procedure
Annex H	Winter Maintenance Manual
Annex I	Humane Society Disaster Manual
Annex J	Provincial Emergency Information Plan
Annex K	City of Windsor Nuclear Emergency Response Plan
Annex L	Amherstburg Nuclear Emergency Plan
Annex M	Provincial Nuclear Emergency Response Plan
Annex N	Heat Alert Response Plan
Annex O	Critical Infrastructure List
Annex P	Aiding Vulnerable Populations in Emergencies
Annex Q	Community Development & Health Services Emergency Response Plan
Annex R	Emergency Management Program Committee Terms of Reference

12.0 Glossary

Command Post: The physical location of the tactical level, on scene incident command and management organization.

Critical Infrastructure: Critical infrastructure is the interdependent, interactive, interconnected networks of institutions, services, systems and processes that meet vital human needs, sustain the economy, protect public safety and security and maintain continuity of and confidence in the organization.

Community Control Group: That group of key individuals directing those services necessary for mitigating the effects of the emergency.

Disaster: A term which is used by the provincial and federal government to describe a major emergency which is governed by those levels of government.

Disaster Recovery Assistance for Ontarians (DRAO): A provincial financial assistance program intended to alleviate the hardship suffered by individuals, farmers, small business enterprises and non-profit organizations, whose essential property has been damaged in a sudden and unexpected natural emergency, such as a severe windstorm, tornado, flood, forest fire or ice storm.

Emergency: “Emergency” means a situation or an impending situation that constitutes a danger of major proportions that could result in serious harm to persons or substantial damage to property and that is caused by the forces of nature, a disease or other health risk, an accident or an act whether intentional or otherwise.

Emergency Area: The area in which the emergency exists.

Emergency Management Program: A program that is based on a hazard identification and risk assessment process and leads to a comprehensive program that includes the four core components of mitigation/prevention, preparedness, response and recovery. The program will consist of a risk analysis, a current emergency response plan based on that analysis, the operation of an Emergency Management Program Committee, an Emergency Operations Centre, a formalized training and exercise program, a Community Emergency Information Plan, a Community Public Awareness Program, and will be reviewed annually.

Emergency Information Officer (EIO): The Manager of Corporate Communications or alternate for the City of Windsor will perform the role of Emergency Information Officer to co-ordinate the internal and external dissemination of information.

Emergency Management Program Committee: Mandatory committee, which advises council on the development and implementation of the Region’s emergency management program, and conducts an annual review of the City’s emergency management program with recommendations to Council for its revision, if necessary.

Emergency Operations Centre: A designated facility established by an agency or jurisdiction to coordinate the overall agency or jurisdictional response and support to the emergency.

Emergency Social Services (ESS): The provision of food, clothing, shelter, registration and inquiry, and personal services during and following an emergency in order to meet essential human needs .ESS also provides temporary rehabilitation assistance until regular pre-emergency social services resume operations, or until other plans and programs come into effect.

Evacuation: Organized, phased, and supervised withdrawal, dispersal, or removal of civilians from dangerous or potentially dangerous areas, and their reception and care in safe areas.

First Responders: Emergency response personnel who are normally the first to respond to any emergency. They include e.g. the Fire Department, Police Services and Paramedic Services.

Flood: A general and temporary condition of partial or complete inundation of normally dry land areas from overflow of inland or tidal water, unusual or rapid accumulation or runoff of surface waters, or mudslides, mudflows caused by accumulation of water.

Hazard Identification Risk Assessment (HIRA): Identification of hazards or risks to public safety, public health, the environment, property, critical infrastructure and economic stability from natural, human-caused and technological sources/activities and evaluation of the importance of the activity to the continued operation of the community. The vulnerability of the community to each activity should also be evaluated.

Incident Commander: The person at the incident site from the lead agency who coordinates and manages the response to the emergency.

Incident Management System (IMS): A standardized system that defines the basic command structure, and roles and responsibilities required for the effective management of an emergency incident or situation.

Inner Perimeter: A restricted area in the immediate vicinity of the emergency scene as established by an Officer-In-Charge/ Incident Commander from a responding emergency service. Access to the inner perimeter is restricted to those essential emergency personnel actively involved in the occurrence.

Operational Period: The period of time scheduled for execution of a given set of operational actions as specified in the action plan. Operational periods can be of various lengths, although usually not over 24 hours.

Outer Perimeter: The geographic area surrounding the inner perimeter. This area will serve as a co-ordination and assembly point for essential emergency personnel. Access to the outer perimeter is restricted to essential emergency personnel as determined by the Incident Commander.

Provincial Emergency Operations Centre (PEOC): The designated facility established to manage the response to and recovery from the emergency or disaster for the province of Ontario.

Reception/Evacuation Centre: A reception/evacuation centre is the site where emergency services (food, clothing, referral to shelter, referral to social services, registration and inquiry) are offered to persons displaced by an emergency.

Recovery: The recovery phase begins immediately following an emergency, with efforts to restore minimum services and continues with long-term efforts to return the community to normal. Immediate recovery activities include assessing damage, clearing debris, providing shelter and restoring food supplies and utilities. Long-term recovery activities include rebuilding and redeveloping the community and implementing mitigation programs.

Regional Fire Coordinator (or Alternate): A Fire Chief from one of the fire departments in the Region, appointed by the Ontario Fire Marshall, to serve as coordinator of the region-wide Mutual Aid Fire Plan.

Resource Management: Those actions taken by an organization to: identify sources and obtain resources needed to support emergency response activities; coordinate the supply, allocation, distribution, and delivery of resources so they arrive where and when they are most needed; and maintain accountability for the resources used.

Response: In emergency management applications, activities designed to address the immediate and short-term effects of the emergency.

Temporary Morgue: A facility that is reorganized from its original purpose to serve for a limited time as a laboratory where deceased persons and their effects undergo processing. This includes medical examination, identification, engineering and inventorying to support an accident investigation and determine cause(s) of death.



City of Windsor

Emergency Management Windsor
815 Goyeau St.

Windsor, ON Canada N9A 1H7

Hazard Identification Risk Assessment (HIRA)

A Hazard Identification Risk Analysis (HIRA) ensures that potential risks to the home are identified and assessed as to their potential risk to the residents and staff. The HIRA is used to prioritize prevention, mitigation and training priorities for the home.

There are 2 phases of completing a HIRA process: Hazard identification and risk analysis

Hazard Identification determines the various hazards that are pertinent to the home's specific location. This is completed by assessing what types of emergencies could occur within your home and in the community.

The second process is the risk assessment, determining the probability of a potential emergency occurring and the consequence of the emergency should it occur.

Probability/Likelihood

1. **RARE**- occurs once every 10 years
2. **UNLIKELY**- occurs every 6-10 years
3. **MODERATE**- occurs every 2-5 years
4. **LIKELY**- occurs 1x per year
5. **ALMOST CERTAIN**- occurs more than 1x per year

Consequence

1. **INSIGNIFICANT**-no injuries, minor damage assets, no damage to infrastructure, no disruption to delivery of services.
2. **MINOR**-minor non life threatening injuries, minor damage to assets and infrastructure, minor disruption to service delivery, critical operations can function full, other operations function with some accommodation
3. **MODERATE**- serious injuries that require acute medical care and removal from workplace, high number of minor injuries, more widespread damage to assets, longer disruption in service delivery
4. **MAJOR**- some loss of life, higher number of serious injuries, more serious asset and infrastructure damage that compromises the building requiring alternate work location for some staff affecting some departments.
5. **CATASTROPHIC**- Widespread loss of life and serious injuries, widespread/serious damage to property and infrastructure, financial devastation, assets destroyed, loss of data, loss of key personnel.

Threat	Probability/Likelihood	Consequence	Priority
Utilities & Services			
External Power Failure	5	2	7
Loss of Natural Gas	1	2	3
Gas Line Rupture	1	5	6
Loss of Water	1	2	2
Fuel Shortage	1	1	2
Communications Services Breakdown	1	1	2
Sewage/Drainage/Waste Removal	1	1	2
Air Conditioning Failure	4	1	5
Heating System Failure	4	1	5
Infrastructure			
Building collapse/instability	1	5	6
Transportation incident involving staff/residents	1	2	3
Fire	2	2	4
Hazardous materials spill	1	1	2
Working Alone	1	1	1
Information Technology			
Loss of life safety or security systems	1	4	5
Loss of Call system	4	4	8
Loss of Phone System	3	3	6
Loss of Internet	4	2	6
Environmental			
Tornado	3	5	8
Electrical Storm	1	4	5
Flooding	3	2	5
Prolonged Severe Cold	1	1	2
Prolonged Severe Heat	2	2	4
Winter Storm	4	2	6
Pandemic	1	4	5
Epidemic	3	4	7
Group Illness	1	3	4
Tsunami	1	5	6
Earthquake	1	5	6
Landslide	1	5	6
Hurricane	1	5	6
Wildfires	1	5	6

LIKELIHOOD	1	2	3	4	5
1	5	10	15	20	25
2	4	8	12	16	20
3	3	6	9	12	15
4	2	4	6	8	10
5	1	2	3	4	5

HIRA MATRIX

EVACUATION MEETING AREA

Policy

Huron Lodge will select a meeting area to be used in an evacuation prior to an emergency.

Procedures

The North-East Corner of the parking lot at Huron Lodge is the evacuation meeting area.

Staff will evacuate the residents following the CODE GREEN procedure.

Staff will determine if everyone has been able to leave the building.

A triage area will be set up for individuals in medical distress.

It will serve as a common place for staff and EMS to tend to residents.

This area will also assist in helping to control the movement of people.

AREA OF REFUGE

Policy

Huron Lodge will establish an area of refuge if an emergency evacuation is necessary. The home's area of refuge is external to the home. Access to the area of refuge must be available 24 hours a day. Huron Lodge has refuge location agreements in place.

Procedures

Make plans and establish agreements for areas of refuge.

***See letters of agreements attached**

FOOD AND FLUID PROVISION

Policy

Huron Lodge has a plan in place to provide food and fluid to the residents during an emergency.

Procedure

If possible, during an emergency, meals will be prepared in the Huron Lodge's kitchen and then transported to the residents to the alternate location.

In the event that the evacuation site has a kitchen available to prepare meals for the residents then staff will use that area as a first resource.

If the home's kitchen is not usable and there is not one available at the evacuation site, a mobile kitchen will be set up.

Vendor supported ready to serve meals will be sent to an alternate location if necessary.

Communications Plan

Policy

Huron Lodge has a plan in place to keep frequent and ongoing communication in place during an emergency with residents, substitute decision makers (SDMs), staff and caregivers.

This includes communication at the beginning of the emergency, when there is a significant status change throughout the course of the emergency and when the emergency is over.

Procedure

The Everbridge notification system is activated to keep residents, substitute decision makers (SDM), staff and caregivers up to date on information regarding an emergency.

The message that is sent out via the Everbridge system is printed out and given to members of the Residents' Council and is posted in the Residents' Library.

STAFF CALL BACK

Policy

Huron Lodge has a plan in place to call staff back to the facility in case of an emergency when additional staff may be required.

Procedure

In the event that staff need to be contacted once an emergency has been established, the Administrator/designate will activate the Everbridge notification system. As such information can be further communicated as well as additional staff are informed to return to work as needed due to the emergency.

This system is a notification platform that has the capability of doing mass notification to all individuals included in the data base.

TRANSPORTATION

Policy

Huron Lodge has arrangements made for transportation services during an emergency to transport residents to an area of refuge.

Procedure

Staff will porter residents to areas of refuge within walking distance

Upon need for evacuation transportation will be secured through Transit Windsor as both Transit Windsor and Huron Lodge are municipal departments and will work in cooperation.

If necessary, medication, supplies, and equipment will be transported using the same means.

Huron Lodge has met with external partners such as local hospitals, EMS, Fire Department and plans are in place for a regional response in case of evacuation. A regional response will involve external partners in the transportation plans using existing agreements.

Company/Agency Contact Information

Transit Windsor 519-944-4111

Handi-Transit 519-966-0930

Crown Accessible Medical Transportation 519-977-0666

Disaster Recovery

Policy

Huron Lodge has a plan in place to restore regular operations after an emergency has occurred. Strategies incorporated into the plan can help bring operations back to normal after a disaster. The selection of an appropriate recovery strategy depends on the severity of the disaster.

Procedure

Recovery Strategies

Recovery strategy #1

The facility has minor or no damage

Conditions do not require immediate evacuation/relocation

Normal health care services can continue with minor modifications as soon as immediate threat passes

Recovery strategy #2

The facility has incurred minor damage

The situation poses no threat to life and safety

No need to move to an alternate site

Normal health care services can continue with minor modifications by repairing equipment and activating minimal support from designated service providers

Concentrate on repairing the facility

Recovery strategy #3

A portion of the facility has incurred minor to moderate damage

Normal health care activities are not compromised but adjustments may be necessary

Clinically complex residents may need to be evacuated

Concentrate all resources by establishing health care activities in the unaffected area of the home

Activate moderate disaster support from designated service providers/outsourcing of some support processes (ex. laundry, meals)

Recovery strategy #4

The entire facility has incurred moderate damage

The facility is evacuated and service operations are established at another location until the facility is operational

Recovery strategy #5

The facility has incurred severe damage

The facility is evacuated and service operations are established at another location

The facility may need have extensive construction or be rebuilt

Residents may not be able to relocate back to the facility

Resuming Operations

Establish a recovery team if necessary

Establish priorities for resuming operations

Continue to ensure the safety of residents, staff, visitors and volunteers

Assess remaining hazards if any

Debrief employees, residents, family and volunteers

Keep detailed records

Account for damage related costs

Notify resident's families, employee's families, off duty staff etc.

Mental Health Support

For those residents, staff, families, volunteers that have experienced trauma due to the emergency there are several options for support available:

FSEAP.....1-844-720-1212

Canadian Mental Health Association.....519-255-7440

Victim Services.....519-723-2711

HDGH Community Crisis Centre.....519-973-4435

EMERGENCY COLOUR CODES

CODE GREEN	EVACUATION
CODE YELLOW	MISSING RESIDENT
CODE ORANGE	EXTERNAL/NATURAL DISASTER
CODE RED	FIRE
CODE WHITE	VIOLENT SITUATION
CODE PURPLE	HOSTAGE TAKING
CODE BROWN	HAZARDOUS CHEMICAL SPILL OR LEAK
CODE SILVER	PERSON WITH A WEAPON
CODE BLACK	BOMB THREAT
CODE GREY	LOSS OF ESSENTIAL SERVICES
CODE BLUE	MEDICAL EMERGENCY

HURON LODGE FIRE PLAN

INTRODUCTION

The **Ontario Fire Code**, Section 2.8, requires the establishment and implementation of Fire Safety Plan for every building containing a Group A or B occupancy and to every building required by the **Ontario Building Code** to have a Fire Alarm System.

The **Fire Protection & Prevention Act (FPPA) Part VII 28.(3)(b)**, states that “every person who contravenes any provision of the Fire Code and every Director or Officer of a corporation who knowingly concurs in such contravention is guilty of an offence and on conviction is liable to a fine of not more than \$50,000 or to imprisonment for a term of not more than one (1) year or to both”.

The **Ontario Fire Code** is a Provincial regulation of the **FPPA**. This code requires the owner to be responsible for carrying out the provisions of this Code, and defines “owner” as “any person, firm, or corporation having control over any portion of the building or property under consideration and includes the persons in the building or property”. Consequently the owner may be any one of or combination of parties, including building management, maintenance staff and tenant groups.

It is advisable that you obtain your own copy of the **Fire Code** and the **FPPA**. These documents may be purchased from the Government of Ontario Book Store, 50 Grosvenor Street, Toronto, Ontario M7A 1N8.

The implementation of a Fire Safety Plan helps assure effective utilization of life safety features in a building, to protect people from fire. Fire Safety Plans are intended to assist the owner of a building with the basic essentials for the safety of all occupants, to ensure an orderly evacuation at the time of an emergency and to provide a maximum degree of flexibility to achieve the necessary fire safety for the building.

Building Owner Information

Owner Name: Huron Lodge LTC - Corporation of the City of Windsor
Street Address: 1881 Cabana Road West
City: Windsor
Province: Ontario
Country: Canada
Postal Code: N9G 1C7
Office Phone: 519-253-6060
Office Fax: 519-977-8027

Building Managers/Supervisors Information

Position	Work Phone	Cell Phone
Administrator	519-253-6060 ex. 8253	
Manager of Resident & Corporate Services	519-253-6060 ex. 8254	
Director of Resident Services	519-253-6060 ex. 8244	
Manager of Nutrition and Dietary Services	519-253-6060 ex. 8226	
Director of Care	519-253-6060 ex. 8269	
Assistant Director of Care	519-253-6060 ex. 8234	
Assistant Director of Care	519-253-6060 ex.8247	
Clinical Care Supervisor	519-253-6060 ex.8242	
On Call Manager	519-259-3252	
Supervisor of Facilities	519-253-6060 ex.8225	

EMERGENCY CONTACT LIST

<i>CONTACT NAME</i>	<i>NON-EMERGENCY</i>	EMERGENCY
Police	519-258-6111	9-1-1
Fire	519-255-6478	9-1-1
Ambulance	519-258-2155	9-1-1
Hydro Company	519-255-2727	519-255-7818
Water Company	519-255-2727	519-255-7130
Union Gas	1-877-969-0999	1-877-969-0999
Poison Control	1-800-268-9017	1-800-268-9017
Windsor Regional Hospital – Metropolitan Campus	519-254-1661	519-254-1661

Emergency Preparedness Team

FIRE CONTROL OFFICER (FCO)

Responsibilities:

Appointment of Staff

The Registered Nurse in RHA 1:1 Poplar on each shift to act as the **Fire Control Officer** in the event of a fire or other emergency situation and to carry out all required duties as outlined in this plan.

Responsibilities of the Fire Control Officer (FCO)

At the start of the shift:

- Assign **2 Fire Team Leaders (FTL)**.
- Assign **2 Fire Team Runners (FTR)**.
- For nursing staff FCO will go to 4th floor and highlight staff members name on the sign in sheet and beside the name write FTL or FTR and circle it.
- Emergency Preparedness Team Boards – FCO to call Registered Staff in each unit to inform names of assigned staff.
- Registered staff are to notify their staff in their RHA's of the FTL/FTR positions.
- At that time the FTL & FTR are to call FCO to state that they are aware they are the FTL & FTR.

Tear off task sheets are available in the booklets that are located at the Emergency Preparedness Team Boards for staff to access.

- **Fire Control Office Binders** for Emergency Preparedness are located in the secured unit "Poplar" home area on 1st floor.

During Fire Alarm or Drill:

- During a Fire Alarm or Drill the FCO will receive updates from the FTL/FTR or designate in regard to the status of the alarm.

- Once an update is received the FCO is to use the **[Mike System]** and update the facility in regard to the status of the alarm.

FIRE CONTROL OFFICER

Emergency Duties

Upon Hearing the Alarm

1. Call 9-1-1
2. Proceed to **Fire Alarm Control Panel (FACP)** on the first floor nursing station to determine location of fire and press “Panel Silence”.
NOTE: CAT 45 – is the Fire Panel Key; GA – is the Pull Station Key
3. Unlock **Fire Control Key Box** located at first floor nursing station and retrieve keys.
4. The **1st Fire Team Runner** to arrive at **Fire Control Officers** location is given 2 sets of Master Keys and immediately proceeds to the location of the **Fire Team Leaders**.
5. The **2nd Fire Team Runner** that arrives at the Fire Control Officers location is informed of alarm location and is given map of facility, set of Master Keys and dispatched to the front entrance.
The elevators during the fire alarms will home to the first floor. Doors will open and all elevators will remain on the first floor and will stay open until reset. The Fire Department has an override key and is able to utilize the elevator at any time.
6. The Fire Control Officer must:
 - Open the fire panel.
 - Silence the **Panel only**.
 - Push “**all call**” button -it will turn green.
 - Take “**Microphone**” out of the holder by sliding it to the left.
 - Hold the “**Microphone**”.
 - Push the button “**in**” on the side of the “**Microphone**” and hold.
 - You will hear a loud sound over the “**Microphone**”, continue to hold button in.

- Once sound ceases begin to talk holding button in.
- Announce the location of the alarm from the fire panel. Speak slowly, stating the following:

○ **“CODE RED + LOCATION” x3**

- Continue to hold the button on the microphone.
- Announce **“All staff please report back to your assigned areas immediately, all staff please report back to your assigned areas immediately”** then repeat again **“the alarm is occurring in LOCATION.”**

3 methods to initiate complete evacuation code

- Pull station key switch (**GA key**) ¼ turn to the right (clock wise), or
- Fire Control Officer can activate at panel. Push Button “Total Evacuate” and use the **[Mike System]** to direct staff immediately.
- After 5 minutes the alarm will automatically be activated.

7. The Fire Control Officer will be informed of the alarm details by phone ex 8267 or by walkie-talkie. Only the Fire Department can authorize “Alarm Silence” & “Reset”

8. Upon receiving instructions of resetting Fire Control Officer must:

- Reset Fire Panel-Poplar
- Reset Mag Locks-Poplar
- Reset elevators

NOTE: If a particular detector is out of service call alarm company and have them by pass the detector in that area. Fire Watch will go into effect immediately and until the area is back on line.

9. When the Fire Department is on site the Fire Control Officer is to retrieve all information for completion of paperwork.

10. Fire Control Officer is to push the “All Clear” button which announces to the facility that the alarm has ended and/or Fire Control Officer using the “**Mike System**” at the end of the automated announcement to inform staff of “**All Clear**”. Fire Control Officer will announce all clear by using “**Mike System**”:

- Push “all call Button” on Panel,
- Remove microphone,
- Key the microphone (Push and Hold Button) on side of microphone,
- Wait for green light to turn on,
- Announce – “**CODE RED – ALL CLEAR**” X3

11. Registered staff from all RHA must call Fire Control Officer and update Fire Control Officer of “**All Clear**” & all residents accounted for.

12. During regular office hours Administration is to call Fire Control Officer in regards to “**All Clear**”. Laundry and Kitchen are to call during operating hours to Fire Control Officer in regards to “**All Clear**”.

13. After hours Fire Control Officer/designate will check Administration, laundry and Kitchen to ensure “**All Clear**”.

14. Collect Fire Team Leaders keys; Fire Team Runner Keys; and Fire Officer keys; (4 sets of keys); conduct Post Meeting/Debrief and fill out Fire Log Book as required.

15. ***Maglocks must not be disengaged at any time. All staff must be notified immediately if locks have been released. This includes any work that may need to be completed.***

NOTE: This Emergency “**Mike Call System**” can be used for notification purposes to staff if direction is needed to be given only during an emergency.

Attention: Penthouse and Roof Area – In case of alarm in Penthouse/ Roof Area, Fire Team Leaders are to remain by 4th Floor stairwell for the arrival of the Fire Department. If Engineer(s) or Emergency Preparedness Co-ordinator is on site they also will respond to this area. Fire Team Leaders will take direction from Fire Department.

Attention: If alarm is in the main electrical room in the basement, Fire Team is not to enter. Wait outside of room for Fire Department.

Attention: After each drill and/or alarm Fire Control Officer, Fire Team Leaders and Fire Team Runners must fill in a pink training form located at the Fire Control Officer desk for submission.

Information for Fire Team Leaders (FTLs)

Position: *Fire Team Leaders (FTLs) – 2 Positions*

Responsibilities:

During Fire Alarm or Drill:

- During a Fire Alarm or Drill the FTL's must provide updates to the FCO in regards to the status of the alarm.
- Depending on the length of the alarm, this could occur several times during the course of the alarm or drill.

Designated **Fire Team Leaders** Shall:

1. Secure resident in your care or equipment; attend fire alarm immediately
2. Check annunciator panel located at each nursing station for location of alarmed zone prior to responding; take the stairwell.
3. Quickly proceed to alarmed floor/area. Investigate for fire/ smoke etc if safe to do so.

NOTE: Keys will be delivered to Fire Team Leaders by the Fire Team Runner. Direct Fire Team Runner to retrieve closest Fire Extinguisher and return to location of alarm.

4. Direct staff to close all doors and windows smoke and reassure residents.
5. Check heat, smoke detectors and pull stations.

NOTE: Heat and smoke detectors if in alarm condition will have blinking red light.

NOTE: When NOT in alarm condition, both heat and smoke detectors will flash a blinking green light.

6. Immediately notify the FCO and advise them regarding the following:
 - a. Exact Location of Fire/smoke/alarm.
 - b. Nature of Fire/smoke/alarm situation.
7. Ensure that all windows and doors are closed, all oxygen concentrators are turned off and evacuated rooms are flagged

8. Direct all occupants away from danger.
9. If an actual fire emergency, activate the **second stage alarm using key GA/at the nearest pull station** to begin evacuation notification.
10. Immediately call **extension 8267/or on walkie talkie** and notify Fire Control Officer of the situation.
11. Fire Department will supervise firefighting efforts and/or evacuation if required. Take direction from Fire Fighters.
12. Evacuation may be necessary.
13. For evacuation only instruct residents and visitors to exit the building using the closest safe exit or stairwell, gathering in the ***Resident's Evacuation Collection Area located in the northeast corner of the parking area – DO NOT USE ELEVATORS .***
14. An alternate Resident Evacuation Collection Area may be designated by the Fire Department upon evacuation.
15. Keep the **Fire Control Officer** informed of all proceedings.
16. Co-ordinate efforts of staff as directed by the Fire Department.
17. Assist the Fire Department as requested.
18. If keys have been given to the firefighters, you must retrieve the keys prior to them leaving the facility.

If Alarm is False

1. Notify Fire Control Officer.
2. Upon authorization of the Windsor Fire Department – **Reset pull station** and then direct the FCO to press – **“Alarm Silence and reset”**
 - **See Diagram page 24**
3. See diagram on reset of pull station.
4. Upon system re-set return master Keys to FCO, and report any issues or concerns at Post Meeting.

Attention: After each drill/alarm Fire Control Officer, Fire Team Leaders and Fire Team Runners must fill in a pink training form located at the Fire Control Officer desk. Submit pink forms to Emergency Preparedness Coordinator.

Information for Fire Team Runners (FTRs)

Position: *Fire Team Runners (FTRs) – 2 Positions*

Responsibilities:

Fire Team Runners (FTR) 1st runner

1. Secure resident in your care or equipment and respond to the fire alarm immediately.
2. Check annunciator panel located at each nursing station for location of alarmed zone prior to responding and prior to taking the stairwell.
3. Immediately respond to the **1st floor secured unit 'Poplar'** to obtain keys and direction from the Fire Control Officer.
4. The **1st Runner to arrive** will be sent with two sets of keys to be immediately taken to the **Fire Team Leaders**. Retrieve the closest fire extinguisher and bring back to the alarm location. They will assist in location of the alarm and they will take direction from the **Fire Team Leaders** ex .monitoring exit doors, shutting doors and windows, calling **FCO** and giving updates, movement of residents to safe location, etc.

Fire Team Runners (FTR) 2nd runner

1. The **2nd Runner** to arrive at Poplar area will be given a set of keys and a map of the facility and will immediately report to the front entrance.
2. The **2nd Runner** will assign any staff member or security to keep elevators clear and residents and visitors away from the front of the elevators.
3. The **2nd Runner** must review the annunciator panel at the front entrance and determine location of alarm. Escort the Firefighters to the location of alarm using stairwells. Keys are to be offered to the firefighters.
4. **2nd Runner** will return to the front entrance to await the arrival of additional Firefighters.
5. The **2nd Runner** will keep the main drive and corridor clear.
6. All keys must be retrieved from the firefighters prior to them leaving the facility.
7. **Fire Team Runners** upon completion of duties are to report to the **Fire Control Officer** and return keys and map, attend post meeting/debrief and complete required paperwork.

Attention: After each drill and/or alarm **Fire Control Officer, Fire Team Leaders and Fire Team Runners** must fill in a pink training form located at the Fire Control Officer desk. Submit pink forms to Emergency Preparedness Co-ordinator.

All Other Staff in Affected Zone

Responsibilities:

All Staff – At Start of Shift

1. Know where your closest pull station, annunciator panel, fire blanket, exit and fire extinguisher are located.
2. Check the **Emergency Preparedness Board** to know who the designated **Fire Team Leaders (FTLs)**, **Fire Team Runners (FTRs)** and **Fire Control Officer (FCO)** are.

Fire Emergency Duties and Responsibilities

3. Secure the resident or equipment in your care and then check the annunciator panel for location of the fire.
4. Shut windows and doors, reassure residents, ensure self or another staff member is located at stairwell exit, manually close RHA door located at entrance of RHA.
5. Proceed to the fire scene with closest available fire equipment i.e. extinguisher, if safe to do so.
6. Ensure oxygen concentrators are turned off, residents are out of immediate danger, and flag evacuated rooms.
7. Move residents and visitors away from the immediate fire area and out of danger – Do Not Use Elevators – unless assisted or directed by Fire Fighters.

**** MONITOR ALL EXIT STAIRWELL & DOORWAYS– AS ALL DOORS WILL DEMAGNETIZE WHEN:**

First Stage The door will open only where alarm has been initiated. All other doors on the floor in which the alarm is initiated, the rest of the stairwell and outside doors and all other floors will remain locked.

Second Stage All doors in the entire facility will demagnetize when system goes into second stage.

****Note: System will go into second stage after 5 minutes or when evacuation is initiated.**

8. Help with evacuation of area and/or building if required.

9. Make sure that all smoke doors are closed.

10. Follow directions given by the **Fire Team Leaders and Firefighters**.

****All staff must respond to the fire alarm, whether on break; whether inside or outside the building, and immediately returning to their assigned work areas. ** Cease regular work and complete Fire Duties.**

All Other staff in Non-Affected Zone

Responsibilities:

All Staff – At Start of Shift

- Know where your closest pull station, annunciator panel, fire blanket, exit and fire extinguisher are located.
- Check the **Emergency Preparedness Board** to know who the designated **Fire Team Leaders** (FTLs), **Fire Team Runners** (FTRs) and **Fire Control Officer** (FCO) are.
- Staff on all other floors upon hearing the alarm is to secure residents or equipment in your care if necessary, close all doors and windows.
- Check annunciator panel for location of fire.

****MONITOR ALL EXITS and STAIRWELL DOORWAYS – AS ALL DOORS WILL DEMAGNETIZE WHEN:**

First Stage The door will open only where alarm has been initiated. All other doors on the floor in which the alarm is initiated, the rest of the stairwell and outside doors and all other floors will remain locked.

Second Stage All doors in the entire facility will demagnetize when system goes into second stage.

****Note: System will go into second stage after 5 minutes or when evacuation is initiated.**

1. Stop work duties and take care of residents and be attentive for further announcements and direction.
2. Go to nearest stairwell/exit door and ensure that you stay present if no one else is located there.
3. Stay alert and seek out registered staff for direction.

4. Reassure residents. **ALL STAFF IN AFFECTED AND NON-AFFECTED AREAS:**

Only If Safe To Do So (Not Blocked By Smoke/Fire).

1. Food Service Staff – Turn off all equipment in use.
2. Office Staff – Lock all valuables in safe.
3. Basement Staff – Turn off all laundry equipment.
4. Listen for further announcements

ALL STAFF

After completion of: a fire drill, false alarm or emergency you MUST

- **Account for all residents**
- **Check all doors /stairwells**
- **Report to the Registered Staff that all residents are safe and the doors are locked. Report malfunctions and “All Clears”**
- **Registered Staff must notify Fire Control Officer that the residents and building are safe and secure.**
- **Fire Control Officer must ensure that other areas, such as first floor and basement, are secure and safe.**

TO SECURE DOORS

- Push door to determine if secure and locked
- If locked, swipe card access three (3) times.
- Open door
- Allow door to close.
- Ensure door is secure.
- Report any malfunctions and concerns immediately to Registered Staff.
- Registered Staff to report all malfunctions and concerns to the Fire Control Officer.

Fire Watch Procedure

- Fire watch is to be completed by the Fire Team.
- The Fire Control officer will determine the method and number of the Fire Team members for completing the fire watch every hour.
- A Fire Watch is initiated when a detector and/or a section of the building is out of service while awaiting a repair. This means that this part of the detector/zone or building is not connected and not operational in regards to the panel. During this time the remainder of the building will be in service and the fire system will be operational.
- For the section of the building in which it has been determined is in Fire Watch, the Fire Team members will check this area once per hour and report immediately after checking each hour to the Fire Control Officer of an “**All Clear**” or any issues that may have arisen.
- The Master Fire Team keys will stay with the FCO unless the area that is in Fire Watch is in a secured area. It will then be up to the FCO and the Fire Team to ensure that the keys remain safe; turned over to the next FCO and members of the Fire Team at each shift change.
- Once the FCO has received the call each hour, it must be documented on the **Fire Watch form** and at the end of the eight hour shift; the FCO must sign off on the form. The FCO must ensure that it is communicated on the 24hr report at the end of the shift that we are in Fire Watch.
- The Emergency Preparedness Co-ordinator, engineer, or designate must ensure that the FCO is notified when the system is back up and running and that the facility is out of Fire Watch.
- The FCO will then call the Fire Monitoring Company and the Fire Department to advise that back in service. This too, must be communicated at the change of shift by the FCO.

BUILDING OCCUPANTS

Persons Requiring Assistance Information Sheet

Name: *All residents*
Disability: *All residents considered mobility impaired*
Location: *All floors*
Special Info:
Main Assistant: *Nursing Staff*

Building Tenant Information

Total Number: *224*
Daytime approx. Number: *224*
Evening approx. Number: *224*

Fire Prevention, Preparedness, and Control

Fire Prevention

- Be alert around electrical equipment. If electrical equipment is not working properly or if it gives off an unusual odour – often the first sign of a problem that could cause a fire – disconnect the equipment and follow Defective Equipment Policy and Procedure.
- Promptly report and replace any electrical cord that is cracked or has a broken connection.
- When using extension cords, protect them from damage; do not put them across doorways or any place where they will be stepped on or chafed. Check the amperage load specified by the manufacturer or the “UL/ULC” listing and do not exceed it. Do not plug one extension cord into another, and do not plug more than one extension cord into one outlet.
- Keep all heat-producing appliances away from the wall and away from anything that might burn. Leave plenty of space for air to circulate around equipment that normally gives off heat.
- Make sure all appliances in your area – such as coffee makers and hot plates – are turned off when not in use. It’s best to assign one person to make this check every day.
- Do your part to keep storage areas, stairway landings and other out-of-way locations free of waste paper, empty cartons, dirty rags and other material that could fuel a fire.
- Report fire hazards to the supervisory personnel.

Fire Preparedness

- Know the location of the two exits closest to your area. Count the number of doors between you and each of those exits – in case you must escape through a darkened, smoke-filled corridor where you can't read the names on the doors.
- Learn where the nearest pull station is located and how to activate it.
- Post the 9-1-1 Fire Department Emergency Number on your telephone.
- Learn the sound of your building's fire alarm.
- During the annual fire drill mock evacuation with the Fire Department which will be conducted jointly with the Fire Department and the Emergency Preparedness Team and the Fire Team, do the following:
 - Review the basic IN CASE OF FIRE procedures posted in the corridors and Evacuation Procedures.
 - Ensure you know who the Fire Control Officer, Fire Team Runners and Fire Team Leaders are and how to contact them.
 - Read the other information provided in Occupant Fire Prevention, Preparedness and Control.
 - Conduct a mock evacuation
- The Fire Alarm Technician to complete annual inspection.
- Tenants that have visitors needing assistance should inform the supervisory personnel of their needs and length of stay.
- Volunteer to be one of two designated persons who will assist a person requiring assistance.

Portable Fire Extinguishers

Portable fire extinguishers are useful only if you know how to use them. If they are for the type of fire you are fighting and if the fire is discovered immediately. You should not attempt to fight even a small fire until people have been evacuated from the area and the Fire Department has been called. Never attempt to fight a fire if any of the following is true:

- You are uncertain about how to use the extinguisher.
- The fire is spreading beyond the immediate area where it started.
- The fire could block your escape route.
- You are alone.

How To Use A Multi-Purpose Dry Chemical Type Fire Extinguisher

Remember the word **PASS**:

- **PULL** the pin.
- **AIM** low ...pointing the extinguisher nozzle at the base of the fire.
- **SQUEEZE** the handle...point at the base of the fire.
- **SWEEP** at the base of the fire until extinguisher is discharged.

Note: each extinguisher only has an approximate 10-second discharge.

- Use multiple fire extinguishers if needed and available.
- REPORT to fire department officer.

Most portable fire extinguishers work according to these directions, but some do not. Read and follow the directions on the fire extinguishers within your building.

Fire Blankets: located in each stairwell on each floor and in kitchen

- Fire blankets are available in the facility.
- Fire blankets may be used to extinguish a fire on a person or object.
- It is imperative that when using a fire blanket on a person, the blanket is never placed over a person's head, as it will suffocate them.
- Fire blanket is to be placed or through to cover the fire and then pat the person or object down if safe to do so.
- Be aware of the location of fire blankets within the facility.

Fire Stretchers: located in each stairwell and on each floor

- Fire stretchers are available in the facility.
- Fire stretchers may be used when evacuating residents and or staff.
- Be aware of the location of fire stretchers within the facility.

Red Fire Phones

- Red Fire Phones are located at all stairwells on all floors.
- These phones are for Fire Department Use Only.
- Fire Department Staff on site can use the red phones to communicate with Fire Department Staff in Central Alarm and Control Facility building, located just outside of main entrance.

BUILDING DESCRIPTION

Building Type

This building is classified as a Type 3/ Partially Combustible, Group B, Division 2 with respect to the building code.

Building Construction Detail

Exterior walls – brick veneer up to the roof, all on steel column supports with insulation and drywall covering on the inside.

Interior walls – (separating units and hallways) poured concrete supported by steel framing with drywall covering on both sides – (separating rooms within units) steel framing with drywall covering on both sides.

Interior floors – pre-cast concrete supported by steel joists.

Roof – insulated pre-cast concrete decking with steel truss supports with tar and gravel. Tar and gravel and penthouse with steel truss supports.

Building Size

Building Area

Building Area: 40,000 Square Feet (per floor; between exterior walls and/or fire walls/ footprint equals 45,518 Square Feet).

Gross Area: 166,7920 Square Feet (sum of all building areas).

Above Grade:

Number of Stories: 4 plus Penthouse
Height of 1st Storey: 12 (Feet)
Height of 2nd Storey: 10.7 (Feet)
Height of 3rd Storey: 10.7 (Feet)
Height of 4th Storey: 10.5 (Feet)

Below Grade:

Number of Stories: 1
Height of Typical Storey: 10.7 (Feet)

Penthouse/Partial Storey

Height 19.2 (Feet)

Other Information

The Penthouse contains the Electrical, Generator, Mechanical rooms and Day Diesel Tank.

On Site Security

Security Type: 24 hrs/ 7 days

Fire Safety Plan

Revised Date: June 2022
Location: Fire Alarm Control Panel in the Central Alarm & Control Facility just outside the main entrance

WHMIS Records

Revised Date: June 2022
Location: ** "Master List" (1) located in the Facility Services Office
** Back of House Receiving on 1st Floor
** On Each Floor
**In Basement

UTILITY PROVISIONS

Domestic Water Supply

Main Water Shut Off

Location: *Basement Sprinkle Room.*

Used for Heat: *yes*

Electrical Systems

Primary Power Supply

Name: *Electrical Room*

Location: *Penthouse Building on West side of the roof.*

Name: *Basement*

Location: *West Corner Room 0128*

North Side Room 0107

Name: *First Floor*

Location: *North Corridor Room 1219*

South Corridor Room 1133

East Corridor Room 1301

West Corridor Room 1244

Name: *Penthouse*

Location: *Emergency Electrical Room 5302*

Electrical Room 5303

Name: *Second Floor*

Location: *North Corridor Room 2263*
South Corridor Room 2134
East Corridor Room 2134
West Corridor Room 2226
Central Area Room 2303

Name: *Third Floor*

Location: *North Corridor Room 3263*
South Corridor Room 3133
East Corridor Room 3163
West Corridor Room 3233
Central Area Room 3303

Emergency Power Generator

Location: Penthouse
Coverage: Partial
Switch Location: Penthouse, Transfer switch is 5302

Emergency Lighting

Name: Emergency Lights
Location: All Corridors, rooms and stairwells.
Model/Type: Existing Lights.

Fuel Systems

Type: Natural Gas
Shut off Location: West side of the building
Used for Heat: Yes
Used for Appliances: Yes

Type: Diesel Shut off

Location: Basement diesel storage room. (Main tank in basement, 2 Day Tanks in Penthouse)
Used for Heat: No
Used for Appliances: Yes when on generator.

Refuse Disposal

Garbage Room

Name: Dry Garbage/ Recycling

Location: Room #1254, inside building

Sprinkler Coverage: Yes

Name: Refrigerated /Laundry Garbage Room # 1251

Location: Off the main floor West Wing/ Near receiving entrance.

Sprinkler Coverage: Yes

Garbage Compactor

Name: Garbage Compactor

Location: Outside the building east of Receiving.

Sprinkle Coverage: No

Elevators, Stairways and Roof Features

Elevator Systems

Elevator Service Company Information

Phone Number: 1-877-276-8691

Elevator System Information

Name: Elevator #3
Location: Main Lobby
Type: Service Elevator (Double Door 1st, 2nd, 3rd, 4th Floor Only)
Red (Firefighter)

Name: Elevator #2
Location: West Wing Hallway
Type: Red (Firefighter) (Basement, 1st, 2nd, 3rd, 4th Floors)

Name: Elevator #1
Location: West Wing Hallway
Type: Red (Firefighter) (Basement, 1st, 2nd, 3rd, 4th Floors)

Stairways

Name: Stairwell "N"
Location: North Wing
Model/Type: Typical

Name: Stairwell "E"
Location: East Wing
Model/Type: Typical

Name: Stairwell "W"
Location: West Wing
Model/Type: Typical

Name: Stairwell "S"
Location: South Wing
Model/Type: Typical

Name: Central East Stairwell
Location: South Wing
Model/Type: Typical

Roof Access

Name: Roof Access #1
Location: Central Stairwell
Type: Interior
Locked: yes
Access Method: Door

Name: Roof Access #2
Location: Central Stairwell to Penthouse
Type: Interior
Locked: yes
Access Method: Door

Name: Roof Access #3
Location: Central Stairwell to Penthouse
Type: Interior
Locked: yes
Access Method: Door

Name: Roof Access #4
Location: South Stairwell
Type: Interior
Locked: yes
Access Method: Hatch

ALARM AND EVACUATION SYSTEMS

Fire Alarm System

Fire Alarm System General Information

<i>Make:</i>	<i>G E Security "Edwards" EST 3 with voice</i>
<i>Model:</i>	<i>Complete with graphics</i>
<i>Number of Zone Covered:</i>	<i>86</i>
<i>Stage:</i>	<i>Two Stage</i>

Fire Alarm System Control Panel(s) Information

<i>Name:</i>	<i>FACP (Fire Alarm Control Panel)</i>
<i>Location:</i>	<i>In the CACF room (Central Alarm & Control Facility) this location is outside the facility at north main entrance.</i>

Note: system has capability of separate zone by zone paging evacuation.

Fire Alarm System Remote Annunciator(s) Information

<i>Name:</i>	<i>Main F/A (Fire Alarm) Annunciators</i>
<i>Location:</i>	<i>Under common enclosure at Front Entrance</i>

<i>Name:</i>	<i>Remote LCD/LED Annunciators</i>
<i>Seven (7) located throughout the facility, at each nursing station.</i>	

Fire Alarm Devices Physically Attached To Fire Alarm System

Smoke Detector

Name: *Smoke Detectors*

Location: *Throughout all hallways and common areas;
Basement; Elevator Shaft; Penthouse; Resident Rooms;
Tops of Stairs; Duct Work.*

Heat Detectors

Name: *Heat Detector*

Location: *Mechanical and Electrical Rooms*

Pull Station

Name: *Pull Station*

Location: *At all exit doorways*

Speakers

Name: *Speakers (Sound)*

Location: *Throughout all floor areas*

Strobe Lights

Name: *Strobe Lights*

Location: *Throughout all floor areas*

Fire (Red) Phones

Name: Fire (Red) Phones
Location: On all floors at stairwell doors

Nurse Call Red Light

Name: Nurse Call Red Light
Location: Outside of each Resident's Room

Kitchen Hood System

Name: Kitchen Suppression System
Location: Main Kitchen

Sprinkler System

Name: Sprinkler System
Location: Every Floor has North/South Sprinkler flow and ESV (Electrically Supervised Valve).
Sprinkler heads are throughout all floor areas.
Penthouse has own flow and valve.
Basement has several flow and ESV (Electrically Supervised Valve) designations.

Fire Pump

Name: Fire Pump
Location: In Basement

Evacuation Information: Emergency Exit Routes and Areas Of Assemble

Interior

Name: **1st Stage**

Location: *This involves moving resident(s) out of room(s) affected*

Name: **2nd Stage**

Location: *Horizontal evacuation involves moving the resident(s) to the other side of the smoke/fire door.*

Name: **3rd Stage**

Location: *Vertical evacuation involves moving the resident(s) to a lower floor or ground level via the closest fire exit.*

Exterior

Name: **4th Stage**

Location: *Total evacuation involves moving residents both horizontally and vertically to the outside of the building.*

- 1. Evacuate building via the nearest exit.*
- 2. All persons are to proceed to the designated Resident's Evacuation Collection Area located in the northeast corner of the parking area as shown on Site Plan drawing.*
- 3. An alternate Resident Evacuation Collection Area may be designated by the Fire Department upon evacuation.*

FIRE PROTECTION FACILITIES

Water Supply/Hydrants

Hydrant(s)

<i>Name:</i>	<i>Fire Hydrant</i>
<i>Source:</i>	<i>Municipal</i>
<i>Size:</i>	<i>Class AA (1500 US GPM & above)</i>
<i>Distance:</i>	<i>5 feet</i>
<i>Location:</i>	<i>North side of the building.</i>

Sprinkler System(s) and Components

Sprinkler System: Sprinklers

<i>Name:</i>	<i>Sprinklers</i>
<i>Type:</i>	<i>Wet</i>
<i>Supervised by:</i>	<i>Fire Alarm System</i>
<i>Coverage:</i>	<i>Full</i>

Components:

Fire Pump

<i>Name:</i>	<i>Fire Pump</i>
<i>Location:</i>	<i>Sprinkler Room Basement Area</i>

Isolation Control Valve

<i>Name:</i>	<i>Isolation Valve</i>
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Location:

Basement Sprinkler Room

Main Control Valve

Name:

Main

Location:

Basement Sprinkler Room

Name:

Main Risers

Location:

Basement Sprinkler Room

Fire Department Connection

Name:

FD Connection

Location:

North side of building

Standpipe System(s) and Components

Standpipe System: Standpipe

<i>Name:</i>	<i>Standpipe</i>
<i>Type:</i>	<i>Wet</i>
<i>Fire Hose Cabinet(s) Class:</i>	<i>Class III (2 ½" & 1 ½" connector)</i>
<i>Supervised by:</i>	<i>Fire Alarm System</i>
<i>Coverage:</i>	<i>Full</i>

Components:

Isolation Control Valve

<i>Name:</i>	<i>Isolation Control</i>
<i>Location:</i>	<i>Basement Sprinkler Room (Main Valve)</i>
	<i>Note: Also can isolate floor-by-floor and North & South on each floor</i>

Main Control Valve

<i>Name:</i>	<i>Main Valve</i>
<i>Location:</i>	<i>Basement Sprinkler Room</i>

Fire Department Connection

<i>Name:</i>	<i>FD Connection</i>
<i>Location:</i>	<i>North side of building</i>

Portable Fire Extinguishers

General Description of Location and Type

1 ABC-FE in each:

Basement Area:

Maintenance Room
Elevator Machine Room
Laundry Soiled Zone Room
Pandemic Storage Room located near Room 0127

First Floor Area:

North Administrative Wing
Corridor located outside of Secure Unit
Activity Room by Communications Centre
South corridor across from Housekeeping Room 1134
East corridor across from the Electrical Room 1163
Food Preparation area of Main Kitchen (a 10 lb. unit)
Across from Room 1323 behind elevator

Second Floor Area:

Outside Maple Home Area by hand wash sink
Maple Activity Room
North corridor across from the Electrical Room 2263
North corridor by Med Room 2207/Nursing Station
West corridor across from Electrical Room 2233
Core Centre Electrical Room 2303
East Willow Activity Room
East across from Electrical Room 2163
South corridor outside Electrical Room 2133

Third Floor Area:

Activity Room Magnolia Home Area

East corridor across from Electrical Room 3163
South corridor across from Electrical Room 3133
Outside of Magnolia beside Electrical Room 3303
Outside of Hickory Home Area by elevator
Activity Room Hickory
Beside Med Room 3207-Across from Lounge
North corridor across from Electrical Room 3263
West corridor across from Electrical Room 3233

Fourth Floor:

Outside of Sycamore Home Area by elevator
Activity Room Sycamore
Across from Lounge – be Med Room 4207
North corridor across from Electrical Room 4263
West corridor across from Electrical Room 4233
Training Room 4315
Dogwood outside home area by Room 4303
Dogwood Activity Room
South corridor across from Electrical Room 4163
East corridor across from Electrical Room 4143

Penthouse:

At North side double door
Mechanical room – near South exit

C02 Extinguisher in each:

Basement:

Switchgear room

Penthouse:

Generator room

Wet Chemical Extinguisher KP600/1AK

Main kitchen

NOTE: Portable Fire Extinguisher located in every fire hose cabinet within the facility.

Fixed Extinguishing System

Name:	Kitchen
Type:	<i>Chemical</i>
Location:	<i>Kitchen</i>
Supervised by:	<i>Fire Alarm System</i>
Appliance Power Type:	<i>Gas</i>
Appliance Power Turn Off:	<i>Right Side</i>

FIRE RELATED PROCEDURES

Evacuation Procedure

Fire Evacuation – Initiation

Alarm Methods to activate Evacuation

FTL's initiate via pull station
Fire Control Officer to press evacuation key on Fire panel.

Verbal Methods:

Fire Control Officer (FCO) Announced via the Fire Alarm Voice communication system by the FCO

Windsor Fire Department's use of PA system located at all Annunciators and main panel.

Mobility-Impaired Persons

The residents of this facility should be considered and treated as mobility impaired in the event of an evacuation.

1st Stage

This involves moving resident(s) out of room(s) affected.

In the event the fire should block the horizontal evacuation of resident(s), the **Fire Captain of Fire Department with the assistance of the FTL(s)** in charge will determine, based on resident safety, to evacuate the resident(s) vertically.

Note that evacuation of the area directly above and below the fire must also be evacuated.

2nd Stage

Horizontal evacuation involves moving the resident(s) to the other side of the smoke/fire door.

In the event the fire should block the horizontal evacuation of resident(s) based on resident safety, a decision to evacuate the resident(s) vertically may be necessary.

If an evacuation is taking place from the Second, Third or Fourth Floor, go to the First floor unless the **FTL, Fire Control Officer or Fire Dept** instructs otherwise, then it will be their responsibility to ensure a safe evacuation to another area.

3rd Stage

Vertical evacuation involves moving the resident(s) to a lower floor or ground level via the closest fire exit.

4th Stage

1. Evacuate building by the nearest exit.
2. All persons are to proceed to the designated Resident's Evacuation Collection Area located in the northeast corner of the parking area as shown on Site Plan drawing.
3. An alternate Resident Evacuation Collection Area may be designated by the Fire Department upon evacuation.
4. Registered staff/designate is responsible for taking roll call of their staff and residents. If anyone is thought to be missing this should be reported immediately to the Fire Department as they will do a search and rescue if necessary.
5. No one is to re-enter the building once they have exited until the **ALL CLEAR** is given by the fire department.
6. In the event of a total emergency situation, residents will be moved to a temporary accommodation.

First Aid Supplies

First Aid Post supplies are located at each nurse's station

Triage Area

In the event of an evacuation, an ambulance triage area will be established with the assistance of the ambulance service to an area to be determined by the ambulance personnel. Ambulance or bus will transport residents to the available temporary sites and staff will be provided to look after the residents.

Extended Relocation/Evacuation of Residents and Personnel

When it has been determined that the relocated residents may not return to Huron Lodge Long Term Care Home for some time, alternate housing must be arranged. Huron Lodge has agreements with alternate sites to accommodate our residents.

Re-Entry Procedure

No one is to re-enter the building once they have exited until the **ALL CLEAR** is given by the fire department.

1. Prepare and maintain the Fire Safety Plan and submit it to the Fire Chief, for approval and to enforce the established Fire Safety Plan.
2. Hold fire drills as required under Section 2.8.3 of the Fire Code.
3. Maintain a record of any incidents of fire, false alarms or building evacuations.
4. Establishing liaison with Chief Building Emergency Officers of neighbouring buildings in order that mutual assistance can be pre-planned, e.g. shelter occupants during inclement weather.
5. Work out a designated area for the residents to collect outside and away from the building; taking into consideration the geographical location when determining the collection area.

Fire Drill Guidelines

Once per month ensuring all shifts are covered. The Emergency Preparedness Co-ordinator /designate must conduct a fire drill. The drill does not require evacuation of the residents, however, it will provide the residents and staff with the opportunity to hear the fire alarm speakers/sound; visualize the strobe lights and consider their actions in the event that the fire were real. Use the following procedure when conducting the fire drill:

- Notify the Alarm Monitoring Service and the fire department (on their non-emergency phone number) that you are planning to have a non-evacuation fire drill, and that you will call them back when the drill is complete.
- Restore the manual fire alarm pull station, and then reset the fire alarm systems.
- Notify the Alarm Monitoring Service and the fire department that the fire drill is complete.
- Debrief with staff including FCO, FTLs, FTRs, and EPC to review the drill.
- Complete the **Fire Drill Logs**

Emergency Procedures for Occupants

WHEN YOU HEAR THE FIRE ALARM

- STAY CALM
- REMAIN IN YOUR ROOM WITH THE DOOR CLOSED
- TURN OFF NON MEDICAL EQUIPMENT
- FOLLOW STAFF INSTRUCTIONS

IF YOU ARE AWAY FROM YOUR ROOM

- GO WITH A STAFF MEMBER TO A DESIGNATED AREA

IF YOU DISCOVER A FIRE IN YOUR ROOM

- LEAVE YOUR ROOM IMMEDIATELY AND CLOSE THE DOOR
 - CALL FOR HELP
 - NOTIFY STAFF AND OTHER RESIDENTS

Fire Equipment Procedures

Fire Equipment Precautions During Repairs, Alterations & Renovations

Notice must be posted prior to and during repairs, alterations and renovations to fire protection equipment.

Note: Notice is sent by E-mail to all Huron Lodge computer users; each home area must communicate this e-mail at each report at the beginning of each shift; the e-mail is copied and posted on the Health & Safety Board.

In the case of a power outage this must be reported to all areas verbally on each shift and a hand written document is to be posted on the Health and Safety board.

Note: Fire Protection Equipment Shutdown Observation Log Sheet must be completed by the Engineers, Managers or Fire Control Officer when the system is in need of repair, alterations, renovations, or out of service.

Fire Detection & Alarm System

- When the system cannot be repaired and returned to full operation, the following precautions should be implemented:

- Notify the Fire Department and the Fire Monitoring Company System (FMC) of the system status.

- Fire Watch is initiated by the Fire Control Officer.

- Fire Control Officer will assign the Fire Team (Fire Team Leaders and Fire Team Runners) in each area of the home to complete inspection rounds:
 - Inspections will occur every hour, 24 hours per day
 - This must be transferred to each shift.
 - Forms must be completed throughout each hour each shift until system is back in operation.
 - Designated staff to report **'all clear'** or any issues that may arise each hour directly to the Fire Control Officer.
 - Registered Staff or designate to contact Fire Control Officer every hour until the system is clear and up and running.

- Fire Control Officer is on site 24 hours per day, 7 days a week.
- Fire Control Officer is to complete the **Fire Watch Log** at the end of each inspection round/each hour and ensure it is transferred to the next shift.
- Once system is fully operational and back in service, Fire Control Officer will notify the Fire Department and the Fire Monitoring Company System (FMC) that the home is fully operational.

Portable Fire Extinguishers

Where a service company removes a fire extinguisher from the building for an extended length of time, a fire extinguisher of the same type should be provided temporarily in its place.

Fixed Extinguishing System

Do not use any equipment that is protected by a fixed extinguishing system while the extinguishing system is under repair, alteration or renovation.

Automatic Sprinkler System

Alterations:

It is the responsibility of the sprinkler contractor to test the system in accordance with Fire Code following alteration of the system.

Programmed Repairs:

Where operations require the temporary shutting down of sprinkler protection, such operations shall be programmed by the contractor working on the system to enable completion in the shortest possible time and protection to be restored as promptly as possible.

Additional Precautions During Shut-Downs:

During an interruption of normal sprinkler protection, emergency hose lines and portable extinguishers shall be provided, extra watch service shall be placed on duty and temporary water connections shall be made to the sprinkler systems where practicable.

Discontinuance Of Work:

Full sprinkler protection shall be restored or the provisions of an additional precautions during shutdowns and maintained when work on the system is discontinued, as at night-time or during holidays.

Identification Of Closed Valves:

Closed sprinkler control valves shall be tagged or identified in a manner apparent to the responding fire department.

Fire Equipment Procedures After Fire Safety Equipment has Operated

Fire Detection & Alarm System

Procedure for false alarm:

- **ENSURE** the fire department is aware of incident.
- **DO NOT SILENCE OR RESET** the fire alarm system.
- When the fire department is satisfied that the alarm was false, **RESTORE** any activated manual pull stations and **RESET** the system (Fire Control Officer will “**Alarm Silence**” and “**reset**” only under direction of Fire Department)
- **COMPLETE** the *Incident/Activity Report*
- If an **ALARM** occurred in an unoccupied area, a Fire Watch will be initiated and staff will be assigned to completed inspections of the area every hour until the system is fully functioning and operational.
- Staff will report to the Registered Staff or designate in the area after each inspection and the Registered Staff or designate will notify the Fire Control Officer. Fire Control Officer will complete the Fire Watch Log after each inspection.

Where a fire has occurred and damaged system wiring and/or detection devices, or you are unsure of the reset procedures, it is likely that a trouble signal will be indicating on the system. In this case a qualified contractor should be contacted to make the necessary repairs.

Portable Fire Extinguishers

Following operation, the extinguisher shall be refilled and certified by a qualified contractor.

Fixed Extinguishing Systems

When a fixed extinguishing system has been used, a qualified contractor shall service it.

Automatic Sprinkler System

Where a sprinkler has activated during a fire condition or accidentally through mechanical damage it is necessary to place the system back in operation as soon as possible. A qualified sprinkler contractor must conduct this procedure.

HAZARDOUS MATERIALS

Hazardous Material Information

Please refer to WHMIS Manuals at designated areas, which are available on every floor in the building.

Location on each floor will be:

1st Floor:

- Northwest wall across from Stairway “E” at the centre of the building.
- Back of house in main kitchen
- Back of house in Store Keepers office

2nd Floor:

- Northwest wall across from Stairway “E” at the centre of the building.

3rd Floor:

- Northwest wall across from Stairway “E” at the centre of the building.

4th Floor:

- Northwest wall across from Stairway “E” at the centre of the building.

Basement:

- By the elevators

Penthouse:

- In the entrance to the Penthouse on the right.

There is one (1) master file – Facility Manager (basement)

For all information regarding Hazardous Materials please review the Safety Data Sheet books located at various locations within the facility.

INSPECTION, MAINTENANCE & TESTING OF FIRE EQUIPMENT

General

The Fire Code Regulations require that fire protection installations be maintained in operating condition. In most cases the Fire Code does not specify in detail the necessary inspection, maintenance, and testing procedures; instead it references standards such as those developed by the National Fire Protection Association, Canadian Standards Association, and Underwriters Laboratories of Canada. Where such standards are referenced by the code, they have been identified in this plan as Reference Standard.

Records

Records of inspection, testing or maintenance of fire protection equipment, which is completed by the Emergency Preparedness Co-ordinator, qualified person, or a private contractor shall be retained for at least 2 years from the date of the activity. The records shall be located in the Fire Safety Plan for review by the authority having jurisdiction. The activities on the Daily Inspection Report are exempted from this requirement.

Qualified Contractors

Contractors may perform their own unique inspection and testing procedures; however, their procedures must meet the minimum requirements set by the applicable code. Information pertaining to such procedures is available in this part so that the Emergency Preparedness Co-ordinator has some idea of what the contractor should be doing.

Means of Egress

Daily Inspection

Procedure:

- Doors in fire separations shall be inspected to ensure that they remain closed and latched unless the door is equipped with an acceptable hold open device that will permit the door to close and latch automatically in the event of fire.
- Corridors used by the public and exits shall be maintained free of obstructions.
- Exterior passageway and exterior exits stairs shall be maintained free of snow and ice accumulations.
- Check exit lights to ensure they have not been damaged and are illuminated.
- Check fire alarm system, AC power lamp and trouble signal.

Record Keeping: None

Monthly Inspection

Procedure:

- Doors in fire separations shall be operated to ensure that they are properly maintained.
- Doors equipped with a hold open device must release automatically in the event of a fire.

Record Keeping: Monthly Inspection & Testing Report

Fire Detection and Alarm System

Reference Standard: ULC S536, Inspection and Testing of Fire Alarm Systems.

Daily Inspection:

Procedure:

- Check Fire Alarm AC power lamp
- Check Fire Alarm trouble lamps

Record Keeping: None

Monthly Inspection:

Procedure:

- Notify the alarm monitoring company, the fire department and the tenants that you are testing the system. Notify all parties when you have complete testing.
- Under emergency power, one manual alarm-initiating device shall be operated on a rotation basis and shall initiate an alarm condition.
- Intended function of all alarm audible signal appliances shall be ensured
- The annunciator panel shall be checked to ensure that the tested devices annunciate correctly.
- Intended function of the audible and visual trouble signals shall be insured.
- Fire alarm batteries shall be checked to ensure that:
Terminals are clean and lubricated where necessary.

Terminal clamps are clean and tight where necessary.

The manufacturer, where applicable, specifies electrolyte level and specific gravity.

Record Keeping: Monthly Inspection & Testing Report

Annual Service

Procedure:

- Contractor shall perform service in accordance with ULC S536

Record Keeping: Annual Inspection & Testing Report

Sprinkler Maintenance

Sprinkler Maintenance – Wet

Reference Standard:

- Notification – Prior notification of water flow or other tests to be made to a sprinkler system shall be given to parties who could be affected by an alarm.

Weekly Inspection:

Procedures:

- Weekly inspections completed by Contractor in accordance with Fire Regulations.

Record Keeping: Weekly Inspection Report

Monthly Inspection & Tests:

Procedures:

- On electrically supervised systems, the water flow actuated devices may be tested annually. See Annual Tests and Maintenance.

Record Keeping: Monthly Inspection & Testing Report

Bi-monthly Test and Inspection

Procedures: All Sprinkler Systems

- Transmitters & water flow actuated devices shall be tested at intervals not greater than 2 months for system connected to electrical supervisory signal service. (ex. fire alarm system or central station monitoring service)

- Inspect all electrically supervised control valves.

Record Keeping: Bi-monthly Testing Report

Semi-annual Tests:

Procedures: All Systems

- Gate valve supervisory switches, tank water level devices, building and tank water temperature supervisory devices and other sprinkler supervisory devices shall be tested at intervals not greater than 6 months.

Record Keeping: Semi-Annual Inspection & Testing Report

Annual Tests & Maintenance

NOTE: Must be performed by certified personnel or technician

Procedures: Wet Systems

- Water flow alarm tests using the inspectors test connection shall be performed on wet pipe sprinkler systems at intervals not greater than twelve months.

Procedures: All Systems

- Water flow tests using the main drain shall be conducted at intervals not greater than 12 months and ensure that water supply available has not deteriorated.
- Drainage facilities shall be tested to ensure that the drains are capable of taking the full flow from the main drainpipe without causing damage.
- Sprinkler control valves are accessible.
- Pits containing sprinkler control valves are free of water and protected from freezing.
- Sprinkler piping and hangers are in good repair.
- Sprinklers are inspected for damage, corrosion or accumulations of grease, paint or other deposits and are placed where such conditions would impair the operation of the sprinkler.

- An adequate number of sprinklers must be available on site.
- Spare sprinklers shall correspond to the types and temperature ratings of the sprinklers in use.
- A sprinkler wrench shall be kept in the cabinet where the spare sprinklers are stored.

Record Keeping: Annual Inspection & Testing Report

Fifty-Year Test:

Procedure:

- Sample sprinklers from sprinkler systems, which have been in service more than 50 years, shall be sent to a recognized testing laboratory for testing, and this procedure shall be repeated at intervals not greater than 10 years thereafter.
- When sprinklers are required to be tested in conformance with Sentence (1), no fewer than 6 sprinklers of each type shall be tested, except that no fewer than 2 sprinklers per floor per individual system shall be tested.
- All sprinklers shall be replaced in sprinkler systems from which sample sprinklers have been tested and found defective.

Record Keeping: Fifty-Year Test Report

Standpipe & Hose System:

NOTE: Must be completed certified personnel/technician.

Reference Standard: NFPA 14, Installation of Standpipe and Hose Systems.

Alterations – Standpipe systems that have been modified or extended or are being restored to service after a period of disuse exceeding twelve months, shall be flow and pressure tested at the highest and most remote hose connection to ensure the availability of the water supply for which the system was designed.

Monthly Inspection

Procedure:

- Hose cabinets shall be inspected to ensure that the hose is in proper position and that all of the equipment is in place and in operable condition.
- Hose valves shall be checked to ensure they are tight.
- Main shut off valve shall be checked to ensure that it is open.

Record Keeping: Monthly Inspection & Testing Report

Annual Inspection

NOTE: Must be completed by certified personnel/technician

Procedure:

- All portions of the system shall be inspected.

Record Keeping: Annual Inspection & Testing Report

Five-Year Test

NOTE: Must be completed by certified personnel/technician

Procedure:

- The standpipe system shall be flow tested at intervals not greater than 5 years to ensure that the design flow can be delivered.
- If during the flow test there is an identification of the presence of debris in the piping, the entire system shall be flushed of foreign material.

Record Keeping: Five-Year Test Report.

Freezing Protection – Annual Inspection

NOTE: Must be completed by certified personnel/technician

Procedure:

- Check automatic heat tape to ensure that it is operable.

Record Keeping: Annual Inspection and Test Report.

Fixed Extinguishing System

Reference: NFPA 17A, Wet Chemical Extinguishing System

Monthly Inspection

Procedure:

- The extinguishing system is in its proper location.
- Manual actuators are unobstructed.
- Tamper indicators and seals are intact.
- Maintenance tag or certificate is in place.
- No obvious physical damage or condition exists that may prevent operation.
- Pressure gauge(s), if provided, are in operable range.
- Nozzle blow off caps are intact and undamaged.

Record Keeping: Monthly Inspection & Testing Report

Semi-Annual Maintenance

Responsibility: Qualified Contractor

Procedure:

- Contractor to perform maintenance in accordance with the reference standard.

Record Keeping: Semi-Annual Inspection & Testing Report

Emergency Generator

Reference Standard: CAN/CSA-C282-M, *Emergency Electrical Power Supply for Buildings*

Weekly Maintenance Schedule

Procedure:

- Examine the following:
- Fuel tank level
- Lubricating oil level
- Engine coolant
- Heaters, lubricant and/or coolant
- Engine, generator, fuel tanks and cooling systems for evidence of leakage.
- Operation of fuel transfer pump.
- Starting system batteries, etc., for leakage, cleanliness and terminal security.
- Air tanks for pressure (air motor system)
- Valves for leakage (air motor system).
- Operation of auxiliary engine and compressor (air motor system).
- Bleed off condensation (air motor system).
- Louver settings- control panel settings (ensure the unit is ready for start-up).
- Battery electrolyte level
- Battery specific gravity
- Battery electrical connections (tightness, leaks or sulfation).
- Battery cleanliness and dryness between terminal posts
- Charger cleanliness and operation of both float and equalize modes.
- Engine governor control linkages and oil level.
- Engine fuel pump oil sump
- Engine fan belts and protective devices
- Panel covers are secure and annunciator lamps are operational.

Monthly Testing

Procedure:

- Have manufacturer's maintenance manual and manual of instructions available.
- Simulate a failure of the normal electrical power supply, arrange so that:

An engine-generator set operates under at least 30% of the rated load for 60 minutes.

All automatic transfer switches are operated under load.

- Record readings of all instruments associated with engine and generator and verify that they are normal.

Procedure to Operate Generator (simulate power failure):

- Engage the emergency power transfer switch.
- Disengage the switch after completion of test to ensure generator is in normal operating condition.

Record Keeping: Weekly Testing and Maintenance Report

Monthly Maintenance and Inspection Schedule

- Include an inspection to assess the correct functioning of all auxiliary equipment such as the radiator shutter control, coolant pumps, fuel transfer pumps, oil coolers, and engine room ventilation controls and operation.
- Generator

Check brush operation for sparking

Check for bearing seal leakage

Semi-Annual Service

Procedure:

Check/Clean the following:

Crankcase breathers
Lubricant governor
Linkages

Record Keeping: Semi-Annual Testing Report

Annual Maintenance

Procedure:

- Contractor shall perform checking, testing, and servicing of items, which require attention at 1-year intervals as specified in the manufacturer's instructions and CSA Standard C282.
- Liquid fuel storage tank shall be drained and refilled with a fresh supply of fuel at intervals not greater than 12 months.

Record Keeping: Annual Inspection & Testing Report

2 Year Checking

Procedure:

- Contractor shall perform checking, testing, and servicing of items, which require attention at 2-year intervals as specified in the manufacturer's instructions and CSA Standard C282.

Record Keeping: 2-Year Inspection and Testing Report

3 Year Checking

Procedure:

- Contractor shall perform checking, testing, and servicing of items, which require attention at 3-year intervals as specified in the manufacturer's instructions and CSA Standard C282.

Record Keeping: 3-Year Inspection and Testing Report

5 Year Checking

Procedure:

- Contractor shall perform checking, testing, and servicing of items, which require attention at 5 year intervals as specified in the manufacturer's instructions and CSA Standard C282.

Record Keeping: 5-Year Test Report

Contingency Plan

1. The following is a list of emergency power items that will continue to operate via back up operator/generator. All listed are as per code:

- Some exterior lighting
- Approximately 1/3 of all corridor and exit routine luminaries
- All stair lighting
- Battery pack in the main electrical room and generator room
- Some lights in dining room, kitchen, telephone room and mechanical room
- All exit lights
- Elevator pit lighting
- Some penthouse lighting
- Enclosed spaces such as tub/shower rooms and Program Activity Rooms will have some luminaries connected to emergency power circuits.
- Fire pump(s) and jockey pump(s) as required
- Excess pressure pump
- Dry pipe sprinkler system air compressor
- Fire alarm system
- Elevators (one & two)
- Smoke exhaust and pressurization fans as required
- Sump pumps
- Receptacles in telephone room for telephone, data and cable TV systems
- Utility room receptacles for charging lift batteries
- Kitchen equipment, walk-in refrigerators and freezer, evaporator coils, condensing units, fire protection system, walk-in freezer alarm, kitchen refrigerator
- Nurse Call System
- Patient Wandering System
- Maglocks as permitted by code.
- Kitchen hood exhaust
- Boilers
- Perimeter heating pumps
- Fridges in medical rooms
- Receptacles in mechanical rooms
- Receptacles in generator room
- Receptacles in electrical room
- Receptacles at reception
- Receptacles in the server room
- Some receptacles in resident corridors
- Emergency generator block heater
- All bathing tubs
- Domestic hot water pumps
- Kitchen make up air
- Kitchen Condensing unit
- Additional assorted plugs

Nursing:

- Nurse call System – is on backup generator
- Lifts – Lifts in progress would be completed by the lift battery capability; residents needing lifts would be transferred on available lift battery power; thereafter, would be transferred on floor.
- Air Mattresses – All air mattresses must be checked.
- Software – Downtime charting would be initiated immediately/MARS copied
- O² – All concentrator O² would be changed to portable O².
- Electrical cords and flashlights are located at security

NOTE: Call Bells – extra nursing rounds would be initiated; residents at risk would be provided with available bed alarms to pull the cord.

Emergency Lighting Units

Reference Standard: Fire Code Regulation

Monthly Inspection

Procedure:

- Self-contained emergency lighting unit equipment shall be inspected to ensure that:
Pilot lights are functioning and not obviously damaged or obstructed,
The terminal connections are clean, free of corrosion and lubricated when necessary,
The terminal clamps are clean and tight as per manufacturer's specifications, and
The battery surface is kept clean and dry.

Record Keeping: Monthly Inspection and Testing Report

Monthly Testing

Procedure:

- Self-contained emergency lighting unit shall be tested at intervals not greater than one month to ensure that the emergency lights will function upon failure of the primary power supply.

Record Keeping: Monthly Inspection and Testing Report.

Annual Testing

NOTE: To be completed by certified personnel/technician

Procedure:

- Self-contained emergency lighting unit equipment shall be tested at intervals not greater than twelve months to ensure that the unit will provide emergency lighting for a duration equal to the design criterion under simulated power failure conditions.
Minimum operating time of minutes.
- After completion of the test, the charging conditions for voltage and current and the recovery period shall be tested to ensure that the charging system is functioning in accordance with the manufacturer's specifications.

Note: Operation time for units is as follows:

30 minutes for a building of this type of occupancy.

Record Keeping: Annual Inspection and Testing Report

CHP Combined Heat and Power Unit

Cogeneration

- Creates power
- Located at the Southwest end of the property
- It is a gas fueled power generation plant
- Has it's own fire panel unit
- Semplex Grinnel unit
- Novec suppression system
- Dry chemical System

FIRE DRILL REPORT

EMPLOYEES ATTENDING FIRE DRILL

Procedure:

Attendance of all staff on site at the time of the drill on each shift is recorded electronically in a Word Document table and listed per department for each drill.

Fire Drill Observer Checklist

Location :	Date:
------------	-------

Please check the appropriate response

1	The announcement for CODE RED 3Xs + location was clearly heard	Yes	No
2	The alarm tone was audible /clearly heard throughout the building		
3	Staff moved residents in area of the alarm behind the fire doors		
4	Residents in non-affected areas are behind closed doors		
5	Fire team had walkie-talkies		
6	The fire team wearing vests		
7	The medication cart was locked		
8	Exit doors are monitored		
9	Mag locks released		
10	The staff kept all residents together in the assigned staging areas		
11	The nurse was available for resident assessment as required		
12	Fire team leaders and runners responded promptly		
13	All doors and windows were closed		
14	Staff responded in a calm manner, reassuring the residents/visitors		
15	Residents in the rooms above, below and across were evacuated		
16	All staff responded to CODE RED		
17	All fire doors automatically closed		
18	Staff secured residents and equipment and assisted in alarm		
19	Staff used the Chain Method to evacuate residents from the area		
20	EVACUCHECK was engaged by staff once a room was clear		
21	Staff felt for heat before opening doors		
22	The residents were returned to their home areas in a calm manner		
23	The CODE RED ALL CLEAR 3Xs was clearly heard		
24	Mag locks engaged at end of alarm		

Start Time: _____

End Time: _____

Observer Name: _____

Comments:

FIRE WATCH

- Fire Watch is initiated by the Fire Control Officer.
- Fire Control Officer will assign Fire Team members to complete inspection rounds in the area of the home.
- Inspections will occur every hour
- Designated staff to report 'all **clear**' or any issues that may arise directly to the Fire Control Officer in Poplar at extension 8267.
- Fire Team to contact Fire Control Officer every hour until the system is clear and up and running.
- Fire Control Officer is on site 24 hours per day, 7 days a week.
- Fire Control Officer is to complete the **Fire Watch Log** at the end of each inspection round and be communicated and passed off at the change of shift.
- Once system is fully operational and back in service, Fire Control Officer will notify the Fire Department and the Fire Monitoring Company (FMC) that the home is fully operational.

FIRE SAFETY MAINTENANCE DUTIES

WEEKLY

TASK 1. Check hoods, filters, ducts in ventilation systems subject to the accumulation of combustible deposits.

TASK 2. Inspect fire hose connections.

TASK 3. Check that unsupervised valves controlling standpipe fire protection water supply are locked in the open position.

TASK 4. Check that unsupervised valves controlling sprinkler fire protection water supply are locked in the open position.

TASK 5. Perform visual observation and testing of all components of Fire Pump as per instructions on Next Page, if applicable.

TASK 6. Perform visual observation and testing of all components of Emergency Generator as per instructions on Generator Page, if applicable.

TASK 7. Check smoke detector in vacant units.

NOTE: Completed by qualified certified Contractor

FIRE SAFETY MAINTENANCE DUTIES

WEEKLY FIRE PUMP

TASK 1. Visual observation of all components of Fire Pump – Before starting the pump:

- Check Fire Pump drip pockets under packing glands to ensure there is no standing water present in drip pockets. (Standing water in drip pockets is the most common cause of bearing failure).
- Check Fire Pump packing adjustment (Approximately 1 drip per second is necessary to keep packing lubricated)
- Observe Fire Pump suction and discharge gauges have normal readings. (A reading that is higher than the suction pressure indicated leakage back from system pressure through the fire pump or the jockey pump)
- Check that pump room temperature is not less than 40 °F and heat is adequate.

- Check oil level indicator to confirm normal level of oil in pump.
- Confirm that controller pilot light (power on) is illuminated.
- Check that transfer switch normal pilot light is illuminated.
- Check that reverse phase alarm pilot is off or that normal phase rotation pilot light is on.

TASK 2. Testing Fire Pump – While pump is running

- Start electric drive fire pump automatically without flowing water through the circulating valve. (Continue running for a minimum of 10 minutes).
- Record suction and discharge gauge readings and also record the difference between the two (The difference between these readings indicates churn pressure and should match churn pressure indicated on fire pump nameplate)
- Check for unusual noise and/or vibration.
- Observe discharge from casing relief valve. (Adequate flow is necessary to keep casing from overheating).
- Record the pump starting pressure.
- Observe the time for motor to accelerate to full speed.

NOTE: Completed by qualified certified Contractor.

FIRE SAFETY MAINTENANCE DUTIES

MONTHLY

<u>TASK 1</u>	<u>Inspect all doors in fire separations</u>
TASK 2	Check that sprinkler system control valves are in the open position
TASK 3	Check that standpipe control valves are in the open position
TASK 4	Inspect all portable fire extinguishers. Completed by onsite Maintenance Engineer.
TASK 5	Test building fire alarm system and check all components including stand-by power batteries (cut circuit and ring bells)
TASK 6	Test sprinkler system alarm
TASK 7	Operate one manual initiating device (done on a rotating basis) to initiate alarm condition
TASK 8	Ensure intended function of all alarm audible signal appliances
TASK 9	Check annunciator panels to ensure tested devices annunciate correctly.
TASK 10	Ensure function of audible and visual trouble signals
TASK 11	Check emergency lighting batteries and test lights to ensure that: <ul style="list-style-type: none"> a) Terminal clamps are clean and tight where necessary b) Electrolyte level and specific gravity, where applicable, are as specified by the manufacturer c) Terminals are clean and lubricated where necessary
TASK 12	Repeat above a), b), c) for fire alarm batteries
TASK 13	Operate the generator at 30% of the rated load for 60 minutes.

Special Extinguishing Systems (e.g. Kitchen Hood Systems)

TASK 14	Check all fixed wet chemical extinguishing system that no physical damage has occurred to the system components that nozzles are aimed in the right direction for the equipment and the caps are in place.
TASK 15	Check for addition of new cooking equipment requiring the addition or relocation of nozzles.
TASK 16	Check that manual actuators are unobstructed & operating instructions are clearly posted nearby.
TASK 17	Check that tamper indicators and seals are intact and maintenance tags are in place and pressure gauges are in operable range.
TASK 18	Update your Mobility Impaired Persons List to insure that it is current.

NOTE: Completed by qualified certified Contractor.

FIRE SAFETY MAINTENANCE DUTIES

EVERY 2 MONTHS

TASK 1: Test transmitters for water flow actuated devices of the Sprinkler System

NOTE: Completed by qualified certified Contractor.

FIRE SAFETY MAINTENANCE DUTIES

EVERY 3 MONTHS

TASK 1: Test fire fighters' elevator(s) for proper operation

NOTE: Completed by qualified certified Contractor.

FIRE SAFETY MAINTENANCE DUTIES

EVERY 6 MONTHS/SEMI-ANNUAL

TASK 1	Test and clean crankcase, breathers, governors and linkages on emergency generator.
TASK 2	Test gate valve supervisory switches and other sprinkler and fire protection system supervisory devices.
TASK 3	Ensure sprinkler heads, piping and pipe hangers are free from damage, corrosion, grease, dust and paint.
TASK 4	Ensure Extinguishing agent containers are fully charged with proper agent and necessary operating pressure is maintained.
TASK 5	Conduct actuating test of system including detection system, alarms, releasing devices, manual stations & other associated equipment (extinguishing agent discharge not required).
TASK 6	Examine the detectors & fusible links, the expellant gas cylinders, the wet chemical containers, releasing devices, piping, nozzles, alarms, auxiliary equipment & hose assemblies for damage.
TASK 7	Verify that the extinguishing agent piping is not obstructed.
TASK 8	Hydrostatically test or replace equipment where examination of components reveals damage such as corrosion or pitting in excess of the manufacturers limits, any structural damage, fire damage, or evidence of any soldering welding or brazing is revealed.
TASK 9	Kitchen hood system is thoroughly cleaned on roof and duct work that runs from the roof to the kitchen every 6 months.

NOTE: Completed by qualified certified Contractor.

FIRE SAFETY MAINTENANCE DUTIES

ANNUALLY

TASK 1	Inspect fire dampers and fire stop flaps.
TASK 2	Inspect chimneys, flues and flue pipes as well as spark arrestors on chimneys.
TASK 3	Inspect and operate disconnect switches for mechanical air conditioning and ventilation system.
TASK 4	Conduct fire alarm drills for supervisory staff.
TASK 5	Test and Inspect Fire alarm system and all related components including standby power batteries.
TASK 6	Inspect integrity of standpipe hose and that hose valves are tight and not leaking water into hose.
TASK 7	Remove and re-rack standpipe hoses.
TASK 8	Test the special extinguishing system and all related components for proper operation.
TASK 9	Inspect fire department connections for Standpipe Hose systems.
TASK 10	Inspect fire department connections for Automatic Sprinkler systems.
TASK 11	Test wet sprinkler system water flow alarm.
TASK 12	Test sprinkler system water flow pressure.
TASK 13	Test fire pump delivers rated flow.
TASK 14	Inspect controls for air-handling system used for ventilation.
TASK 15	Replace fusible links in fixed wet chemical extinguishing systems.
TASK 16	See Annual Report for additional information.

NOTE: Completed by qualified certified Contractor

EMERGENCY GENERATOR SYSTEMS

Procedures to follow before commencement and completion of test.

- Notify Fire Department – Non Emergency 519-255-6478
- Notify alarm company
- Notify Poplar 1:1 nurse

Check Transfer switch utility voltage. Take average of 3 phases.

At end of test:

- Notify alarm company & Fire Department
- Notify Fire Control Officer
- Re-set fire panel

EMERGENCY GENERATOR SYSTEMS

PM Inspections Visits

Visit One (Level 1) Inspection consist of the following:

Visual inspection of overall generator set condition for foreign objects, loose or broken fittings, guards and components. Check all auxiliary equipment in the generator enclosure. Check and adjust the generator output voltage and frequency with an independent hand held meter and adjust as required.

Cooling System

- Inspection of radiator for leaks, damages and debris
- Check ventilation louver operation
- Check coolant level, oil and rust contaminate
- Check hoses and connections for deterioration and tightness (visual)
- Check jacket water heater hoses for proper operation
- Check fan drive pulleys, belts and fan (visual)

Fuel System

- Check fuel tank for leaks and fuel level (4800 liters)
- Check fuel lines for leaks
- Check fuel line brackets for wear points
- Inspect primary and secondary fuel filters for leaks

Air Induction and Exhaust System

- Inspect exhaust manifolds for leaks
- Inspect muffler and piping for leaks, loose hardware, rain cap and supports

Lubrication System

- Check lube oil level and top up
- Check proper operation of oil pressure gauge
- Check hoses and piping for leaks
- Inspect unit for leaks

Starting System

- Check starting batteries for electrolyte level
- Clean and check batteries for loose/corroded connections
- Inspect starter for unusual noises
- Measure amperage draw, transfer test
- Check battery charger output/float rate

Inspect charging alternator belts, pulleys and voltage output, which is 27 DC or better (volts and up).

EMERGENCY GENERATOR SYSTEMS

Engine Monitors and Safety Controls

- Check operation of engine mounted control panel

Generator

- Inspect space heater for proper operation

Control Panel

- Check for proper manual/automatic operation (transfer test day)
- Operational check for correct voltmeter reading
- Operational check for correction ammeter reading (transfer or load test day)
- Operation check for correct frequency reading

GENERATOR WEEKLY SERVICE ROUTINE

INSPECTION CHECKS (UNIT NOT RUNNING)

- Check battery electrolyte level. (Occasional topping up will be required).
 - Check engine oil level. (15W-40) (Maintain level – If level increases, advise Cummins Eastern Canada).
 - Check coolant level (50/50 mix glycol/water).
 - Check fuel level.
 - Check floor for evidence of leaks.
 - Check for cleanliness of area. (The fan will draw in any loose debris from the room).
 - Check block heater. (Unit should be warm at all times – winter and summer).
 - Check room heater. (Room should be maintained at 50 F at all times).
-
- Weekly test is 30 minutes running period.
 - Once every 4-5 weeks, 60 minutes running period at 30%.
 - Six months and one year to be completed by contractor full load test and complete inspection to occur. (Full Service)

EMERGENCY GENERATOR SYSTEMS

UNIT RUNNING CHECK (IN MANUAL MODE)

- Place Selector Switch in RUN (on 3100 panel) / MANUAL and press RUN/STOP button (on 2100 panel) – Machine will start.
- Ventilation louvers should be open slowly as room temperature rises above preset limit.
- Battery charger ammeter should indicate charge.
- Engine oil pressure should indicate 45-100 PSI (30 PSI on LT10, M11, and QSM11 engines)
- Frequency meter should indicate 60-62 Hertz.
- Voltage on all phases should be normal.
- Open muffler drain and allow it to empty.
- Engine coolant temperature will begin to rise as unit warms up.
- Check for leaks.

LOAD TEST (TRANSFER SWITCH IN TEST)

- Place transfer switch in TEST position or press TRANSFER TEST button.
- After 3-5 seconds delay, unit will start and lights will flicker as transfer to load occurs.
- Run set for ½ hour, noting on Generator Test Record Sheet – Engine Temperature, Engine Oil Pressure, Frequency, Voltage, and Amps.
- Check operation of Elevators.
- Return transfer switch to Normal position – Set will run 5 minutes until retransfer set will run 3 minutes until shutdown.
- Check that the ventilation louvers have closed.

NOTE: We do not advise the use of automatic exercise timers – The test should be supervised. We suggest the test be performed on Monday or Tuesday morning to allow time for service in the event of a problem is detected. Feel free to call and ask questions.

EMERGENCY REPOSE – STAFF

IN CASE OF FIRE ALARM

IN THE EVENT OF A FIRE, THE SPRINKLER SYSTEMS IN THAT AREA WILL BE ACTIVATED AND THE DOOR TO THE AREA SHOULD AUTOMATICALLY CLOSE TO CONFINE AND CONTAIN THE FIRE.

STAFF MEMBERS ARE TO REMOVE ANY RESIDENTS FROM HARM AND LEAVE THE IMMEDIATE FIRE AREA.

CHECK ANNUNCIATOR PANEL LOCATED AT EACH NURSING STATION AND RESPOND AS REQUIRED.
CALL 9-1-1

IN CASE OF FIRE

ACTIVATE THE ALARM SYSTEM BY PULLING THE PULL STATION IF NOT ALREADY ACTIVATED

CALL 9-1-1 TO ADVISE THE FIRE DEPARTMENT, EVEN IF AUTO SIGNALING PROVISIONS TO AN ALARM COMPANY ARE IN PLACE

ALL AREAS NOT NORMALLY OCCUPIED ARE TO BE CHECKED BY FIRE TEAM MEMBER(S) IF SAFE TO DO SO (EG: WASHROOMS, STORAGE ROOMS, ETC.)

ONCE EVACUATION OF THE ENTIRE AREA HAS BEEN COMPLETED, THE STAFF MEMBER (FTL) WILL EXIT THE BUILDING AND REPORT TO THE FIRE CONTROL OFFICER OUTSIDE.

PERSONS REQUIRING MEDICAL ASSISTANCE ARE TO BE ACCOMPANIED BY TWO (2) STAFF MEMBERS OR ALTERNATES, TO THE LOCATION OF THE MEDICAL PERSONNEL OR TO THE EVACUATION COLLECTION AREA.

THE FCO OR DESIGNATE SHOULD USE THE EMPLOYEE ATTENDANCE REPORT/RESIDENT AND THE VISITORS LOG TO TAKE A HEAD COUNT, IN ORDER TO ENSURE THAT ALL PERSONS HAVE BEEN EVACUATED.

WHILE OUTSIDE REMIND RESIDENTS TO REMAIN AWAY FROM THE BUILDING AREA AND AWAIT FURTHER INSTRUCTIONS FROM STAFF.

THE RESIDENTS EMERGENCY EVACUATION COLLECTION AREA IS LOCATED OUT THE NEAREST SAFE EXIT AND PROCEED TO:

THE NORTH (MAIN) PARKING LOT OF THE FACILITY FACING CABANA ROAD.

DO NOT RE-ENTER THE BUILDING UNDER ANY CIRCUMSTANCE UNTIL THE “ALL CLEAR” HAS BEEN GIVEN BY THE FIRE DEPARTMENT.

EMERGENCY REPOSE – RESIDENTS AND VISITORS

UPON HEARING FIRE ALARM

RESIDENTS

- IF YOU ARE IN YOUR ROOM, REMAIN THERE
- IF YOU ARE IN THE HALLWAY NEAR YOUR ROOM – GO TO YOUR ROOM AND REMAIN THERE
- IF YOU ARE IN A COMMUNITY ROOM AND IT IS SAFE TO DO SO, REMAIN THERE OR MOVE TO A SAFE AREA
- CLOSE DOORS TO AREA YOU ARE IN TO HELP KEEP SMOKE AND FIRE OUT
- LISTEN FOR ANNOUNCEMENT ON EVACUATION

VISITORS

- STAY WITH RESIDENT YOU ARE VISITING
- CLOSE DOORS TO AREA YOU ARE IN TO HELP KEEP SMOKE AND FIRE OUT
- FOLLOW ALARM INSTRUCTIONS FOR RESIDENTS.
- AWAIT FURTHER INSTRUCTIONS FROM STAFF

IN CASE OF FIRE

RESIDENTS

- LEAVE FIRE AREA IMMEDIATELY
- CLOSE ALL DOORS BEHIND YOU TO CONFINE FIRE AND SMOKE
- SOUND ALARM AND/OR ALERT STAFF
- STAY IN SAFE AREA
- LISTEN FOR ANNOUNCEMENT ON EVACUATION

VISITORS

- ASSIST ANYONE IN IMMEDIATE DANGER – MOVE THEM TO A SAFE AREA AND INSTRUCT THEM TO REMAIN THERE
- CLOSE ALL DOORS BEHIND YOU TO CONFINE FIRE AND SMOKE
- SOUND ALARM AND/OR ALERT STAFF
- AWAIT FURTHER INSTRUCTIONS FROM STAFF
- IF INSTRUCTED – ASSIST WITH EVACUATION

DO NOT USE ELEVATORS

CAUTION

IF YOU ENCOUNTER SMOKE IN CORRIDOR OR STAIRWAY, USE ALTERNATE EXIT IF SAFE TO DO SO

REMAIN CALM

NEVER RE-ENTER A FIRE AREA UNTIL THE ALL CLEAR HAS BEEN GIVEN BY THE FIRE DEPARTMENT THE RESIDENTS EMERGENCY EVACUATION COLLECTION AREA FOR THE RESIDENTS OF THIS FACILITY IS LOCATED IN THE NORTH (MAIN) PARKING LOT

CODE GREEN-Evacuation

Policy

All Huron Lodge staff must be familiar with the process of emergency evacuations. An evacuation drill is required every year.

The Fire Control Officer will determine if an evacuation is necessary. Staff will follow all instructions and procedures during a CODE GREEN.

A CODE GREEN can be caused by any other Emergency code.

During a CODE GREEN a staff call back may be initiated. Staff will report to the evacuation meeting area for instructions.

Procedures

Staff Roles and Responsibilities

FIRE CONTROL OFFICER

- Upon notification of emergency
- Determine emergency level
- Initiate evacuation if required
- Announce **“CODE GREEN + (LOCATION)” 3 times**

RN/RPN

- Provide direction to staff
- Remove med carts, resident charts, & disaster boxes
- Maintain a head count of all residents
- Identify residents with name badges
- Continue to provide care and support to residents

ALL STAFF

- Start evacuation immediately upon hearing CODE GREEN
- Ensure residents in your work area are safe
- Shut down equipment
- Close all doors

- If not in your work area when CODE GREEN is announced proceed directly to your assigned area ensure residents are safe, equipment is shut down and doors are closed; start evacuation
- Search all rooms including bathrooms and closets
- Flag doors using evacuation indicators identifying if the room is vacant or not (flagged identifies a vacant room)

1ST STAGE

- Residents in affected rooms or area are evacuated
- Evacuation directly above and below the affected area must also be evacuated

2ND STAGE

- A horizontal evacuation involves moving residents to the other side of the fire doors

3RD STAGE

- A vertical evacuation involves moving residents to a lower floor or ground level
- Utilize vertical evacuation when life safety is at risk and horizontal evacuation is not possible

4TH STAGE

- Evacuate the building by the nearest exit
- Residents are to be evacuated to the Evacuation area which is the North East corner of the parking lot
- No one is to re-enter the building until the ALL CLEAR is given by the Fire Department

EXTENDED RELOCATION/ EVACUATION OF RESIDENTS

- Arrangements have been made to relocate the residents of Huron Lodge in case of an extended evacuation
- Transportation arrangements in case of relocation have been made

*see Evacuation Area, Areas of Refuge, & Transportation Plans

EVACUATION TEAM & FORMATION

The Chain Method

- Staff are to work in teams of 2
- Teams should be about 10-15 feet apart
- Team A enters room & brings resident to doorway
- Team B takes resident and hands resident off to Team C
- Team A closes the door & flags room
- Teams pass resident toward area of refuge
- Beyond fire doors first

FIRE CONTROL OFFICER AFTER THE ALL CLEAR

- Ensure all residents, staff , volunteers and visitors are accounted for
- Provide medical services to those requiring medical attention
- Hold a debriefing for staff and volunteers
- Make arrangements for counselling services for those that have been impacted by the incident

NOTE: ALL CODES MUST BE REPORTED TO THE ADMINISTRATOR /ON CALL SUPERVISOR

NOTE: THE INTERNAL INCIDENT FORM IS TO BE COMPLETED BY THE FIRE CONTROL OFFICER, & MANAGER AFTER THE COMPLETION OF THE CODE

CODE YELLOW-Missing Resident

Policy

Huron Lodge will ensure an organized and comprehensive approach for any resident considered to be missing.

As soon as a resident is missing, a CODE YELLOW procedure which is defined as an immediate and systematic search of the home and surrounding area will be initiated.

Resident Home Areas must be well supervised at all times.

Procedures

Staff Roles and Responsibilities

RN/RPN

WHEN A RESIDENT IS DETERMINED MISSING

- The RN/RPN who is responsible is to announce **“RESIDENT’S NAME PLEASE RETURN TO YOUR ROOM/HOME AREA”**
- If the resident does not return the RN/RPN who is responsible for the missing resident is to notify all staff in the home that a resident is missing by announcing **“CODE YELLOW RESIDENT’S NAME & HOME AREA” 3 times**
- The RN/RPN on each floor are to gather their staff for designation of duties
First floor staff are to thoroughly check Poplar Unit (all rooms) the first and basement floor areas, inclusive of back of house
Second, third and fourth floor staff are to thoroughly check their respective floor, common areas, offices and their respective stairwells
Fourth floor staff are to also check the Penthouse
- 1 Registered staff and the PSW assigned to the resident will check the grounds
- If the resident is not found and an off property search is required the registered nurse responsible for the resident is to do the following:
 1. Check sign out book outside of unit and security
 2. Call the designated Power of Attorney or Substitute Decision Maker
 3. Notify the resident’s family or responsible person

4. Notify a supervisor on call if resident remains missing/the on call supervisor is to advise the Administrator or designate
 5. The on call supervisor or nursing office during business hours will notify the police giving a full description of the resident
- Any resident that has gone missing for more than 3 hours must be reported Immediately to the Ministry of Health and Long Term Care by the Administrator or designate. A long term care Critical Incident is to be completed in accordance with Huron Lodge procedure and within the expected time lines.
 - Once the resident has been located an in depth clinical assessment of the resident is to occur. All involved personnel and agencies are to be notified by the registered staff member. A revised plan of care is to be completed.
 - **“CODE YELLOW ALL CLEAR ”** 3 times -to be announced
 - On call supervisor is to be updated

AFTER THE ALL CLEAR

- Provide medical services to the resident if required
- Hold a debriefing for staff & volunteers
- Notify family
- Document

NOTE: ALL CODES MUST BE REPORTED TO THE ADMINISTRATOR/ON CALL SUPERVISOR

NOTE: THE INTERNAL INCIDENT FORM IS TO BE COMPLETED BY THE FIRE CONTROL OFFICER, & MANAGER AFTER THE COMPLETION OF THE CODE

CODE ORANGE-External/ Natural Disaster

Policy

Huron Lodge is prepared to receive people requiring emergency care due to an external/natural disaster such as a tornado, flood, or severe storm while ensuring the safety and care of existing residents, staff, volunteers and visitors.

Huron lodge will enact emergency responses to external/natural disasters as directed by emergency officials. Emergency officials decide when the CODE ORANGE is over.

The local or municipal disaster recovery plan may supersede this policy.

Procedures

Upon receiving a phone call alerting the home to the potential for incoming residents gather the following information:

- Name, full contact information and official capacity of the caller
- Nature of the disaster
- Location of the disaster
- Time frame to anticipate residents
- Where the residents are coming from
- Demographics of incoming residents
- Number of residents
- Resources accompanying residents
- Potential duration of stay
- Condition of the residents
- Time of call

Notify the Administrator or designate

If residents are arriving soon announce **“CODE ORANGE ” 3 times**

If the residents aren't arriving soon a CODE ORANGE is not necessary

A team is brought together to prepare for the arrival of the residents

Review all information collected to determine the home's capabilities to assist

Communicate with the organization as to how many residents can be accommodated

Implement staff call back list

Provide resident identification tags

Establish areas for housing the residents

Establish a plan for the visitors for the incoming residents

Arrange for assessments on the incoming residents

Arrange for a staff member to direct incoming residents

Establish washrooms for residents

NOTE: ALL CODES MUST BE REPORTED TO THE ADMINISTRATOR/ON CALL SUPERVISOR

NOTE: THE INTERNAL INCIDENT FORM MUST BE COMPLETED BY THE FIRE CONTROL OFFICER, & MANAGER

CODE WHITE-Violent Situation

Policy

Huron Lodge provides a safe environment for residents, families, staff, volunteers and visitors. A staff member assessing a violent situation or a person with a weapon as posing an immediate danger to themselves/others may call a CODE WHITE. In a CODE WHITE the aim is to remove everyone from the situation to minimize the risk of injury.

Procedures

DURING AN AT RISK, VIOLENT OR POTENTIALLY UNCONTROLLABLE SITUATION

INDIVIDUALS ARE TO FOLLOW CONTROL MEASURES

Risk	Control
Resident to Staff	<ul style="list-style-type: none">• Remove yourself from the situation as long as the resident is in no imminent danger.• Re-approach in a reasonable time.• Report unusual changes in behaviour to the Registered Staff.• Registered Staff are to review medication and call physician as necessary.• Registered staff are to review the plan of care and update accordingly.• Information regarding the resident's behaviour is to be placed on the 24 hour report for a minimum of 3 days and then be re-evaluated before being removed.➤ Also refer to Procedure – Responsive Behaviours – Prevention and Management
Staff to Staff	<ul style="list-style-type: none">• Without being confrontational, quietly ask the staff member to stop the behaviour that is perceived as being inappropriate, harassing or disrespectful.• Acknowledge this is how you feel about the behaviour and attempt to resolve the issue between staff.• If there is no resolve, or the situation escalates, remove yourself from the situation immediately.• Report concerns to a Manager.• Manager will follow up as deemed necessary utilizing Corporate Policies and Procedures.➤ Also refer to Corporate Respectful workplace Program

<p style="text-align: center;">Environment to Outside</p>	<ul style="list-style-type: none"> • Use the buddy system, particularly after dark, when going to vehicle. • Utilize security guard as necessary. • If there is a situation where you believe there is imminent danger for you or anyone else, return to the facility. • Park in well lit visible areas. • Report any slippery spots in the parking lot and on the property to Management, The Charge Nurse, or Security.
<p style="text-align: center;">Environment to Inside</p>	<ul style="list-style-type: none"> • Utilize the Engineer’s book for anything found that may be hazardous and can be repaired by them. • Report any concerns to Managers or on the back shifts, the Charge Nurse. • Clean up all spills on floors immediately and put wet floor sign out till dry. • Complete a circle check on all equipment prior to use • If equipment is defective or inoperable place a DO NOT USE / OUT OF ORDER sign on it and report it – remove equipment. *Please put note in Engineer Book* • Wear appropriate clothing and footwear that is non-slip and in good repair.
<p style="text-align: center;">Visitor to Staff (dealing with difficult situations in your office or RHA)</p>	<ul style="list-style-type: none"> • Address the unacceptable behaviour with the visitor if you feel comfortable. • Report inappropriate situations as they arise. • If the staff member does not feel comfortable, remove yourself from the situation and contact security at 8508 or 8595. Have security come to the area and address the behaviour with the visitor and ask that it stop. • If the behaviour does not stop after the first warning, security has been advised to call the Police. • The RN in charge will notify the manager or Supervisor on Call after hours. • The visitor will be served with a Trespass Notice under the Trespass to Property Act. • Staff members involved will complete a Huron Lodge Accident Incident Report.

- If you identify a crisis situation, feel threatened or there is a possibility of an escalation of violence remove yourself and others from the situation
- Notify Fire Control Officer

Staff Roles & Responsibilities

FIRE CONTROL OFFICER

- Announce **“CODE WHITE (LOCATION)”** 3 times
- Call 9-1-1 if required
- Remove yourself and others from danger
- If necessary only use non-violent interventions
- When the incident has been resolved announce **“CODE WHITE ALL CLEAR”** 3 times

STAFF

- If you are in the immediate area or responding to the CODE WHITE, remove others from harm’s way to a safe location
- If you are in the area of the CODE WHITE assist in evacuating the residents
- Do not try to remove a weapon or subdue the person
- If necessary use non- violent interventions to de-escalate the situation

AFTER THE ALL CLEAR

- Ensure all residents , staff, volunteers & visitors are accounted for
- Provide medical services to those that require medical attention
- Hold a debriefing for staff and volunteers
- Make arrangements for counselling services for those that have been impacted by the incident

NOTE: ALL CODES MUST BE REPORTED TO THE ADMINISTRATOR/ON CALL
MANAGER

NOTE: THE A/I IS TO BE COMPLETED BY FIRST RESPONDING STAFF AND
FORWARDED TO THE FIRE CONTROL OFFICER /THE INTERNAL INCIDENT FORM IS
TO BE COMPLETED BY THE FIRE CONTROL OFFICER, & MANAGER AFTER THE
COMPLETION OF THE CODE

CODE BROWN-Hazardous/Chemical Spill or Leak

Policy

Huron Lodge has planning in place to respond safely to a hazardous/chemical spill or leak. A spill may include liquids, powders, or even gaseous substances. When hazardous materials are unexpectedly released or the size of the spill prevents staff from safely being able to clean it up, a CODE BROWN incident must be initiated.

Staff are trained in the safe handling, storage and disposal of hazardous chemicals.

As soon as a hazardous/chemical spill or leak is discovered actions must be taken to assess the situation; to protect the health and safety of everyone in the area; and initiate clean up following the SDS (Safety Data Sheet)

All hazardous materials will be stored as instructed in the SDS and manufacturer recommendations.

Flammable fuels will not be stored in any building where residents live. With the exception of fuel for generators in approved areas.

Procedures

Staff Roles and Responsibilities

DISCOVERING A SPILL OR LEAK OF A HAZARDOUS OR UNIDENTIFIED MATERIAL

- Notify the Fire Control Officer of any suspected/actual chemical spill or leak

FIRE CONTROL OFFICER

- Announce **“CODE BROWN + (LOCATION)” 3 times** Fire Team to respond

FIRE TEAM LEADER

- Cordon off the area and keep everyone away until the spill/leak can be addressed
- Use the **SPILL acronym** for directions on how to proceed

S- SAFELY EVACUATE EVERYONE FROM THE IMMEDIATE AREA AND SECURE AREA

P- PREVENT THE SPREAD OF VAPOURS BY CLOSING DOORS

I-INITIATE APPROPRIATE SPILL PROCEDURE

L- LEAVE ALL ELETRICAL EQUIPMENT ALONE. DO NOT TURN ON OR OFF

L-LOCATE ANY INFORMATION REGARDING THE CHEMICAL

- If the spill is flammable call 9-1-1 do not pull the alarm, clear everyone from the area, ensure there are no sources of ignition
- Attend to individuals that may be contaminated
- Determine source of spill & take appropriate action to resolve

MANAGEABLE SPILLS

- Initiate clean up following the assessment of the spill and your home's ability
- Obtain the Spill Kit and follow instructions attached *
- Cordon off floor drains or other means of environmental release to prevent leakage
- Large spills may require the fire Team Leader to direct a staff member to obtain a second spill kit from another location
- Announce **"CODE BROWN + (LOCATION) ALL CLEAR 3X"**

UNMANAGEABLE SPILLS

- Assess the spill
- If the spill is outside of the capabilities of the home make arrangements for external assistance

SPILL KIT LOCATIONS

Penthouse; Soiled Utility rooms in all 7 RHAs; Kitchen; Laundry Room; Garage; Receiving; Storekeeper; Maintenance

MEDICATION SPILL KIT LOCATIONS

LOCATED IN ALL 7 MEDICATION ROOMS IN THE RESIDENT HOME AREAS

GAS LEAKS

- For natural gas leaks do not use light switches, or any other source of ignition
- Notify Fire Department
- Notify gas provider
- Shut off gas supply if possible

AFTER THE ALL CLEAR

- Ensure all residents, staff, volunteers & visitors are accounted for
- Provide medical services to those that require medical attention
- Hold a debriefing for staff and volunteers
- Make arrangements for counselling services for those that have been impacted by the incident
- Fire Team Leader restock spill kit

NOTE: ALL CODES MUST BE REPORTED TO THE ADMINISTRATOR/ON CALL SUPERVISOR

NOTE: THE INTERNAL INCIDENT FORM IS TO BE COMPLETED BY THE FIRE TEAM LEADER, & PROVIDED TO THE FIRE CONTROL OFFICER FOR PROCESSING

How to Use Your Spill Kit

Step 1: Protect yourself!

Open the spill kit and put on the PPE including gloves and goggles

Step 2: Respond

Small spills-Place absorbent pads or granular absorbent on the fluid or anywhere needed and allow them to soak up the fluid

Large spills-Protect drains and other sensitive areas by placing snakes around them, and then place at the forward edge of the spill. Then place absorbent pads or granular absorbent on the spilled fluid.

Step 3: Clean-Up & Contact

Once absorbent materials are saturated and the spill has been completely absorbed dispose of them in the garbage bags in your spill kit. Use a broom and dust pan to collect granular absorbent for disposal. Inform a Health & Safety Representative.

Step 4: Prepare for the Future

Restock the Spill Kit so the home is prepared for future spills

CODE GREY-LOSS OF ESSENTIAL SERVICES

HVAC Systems Disruption-Failure/Power Failure/Water Supply Disruption/ External Air Exclusion

HVAC Systems Disruption/Failure

Policy

The HVAC system is maintained as per the manufacturer's specifications to protect the residents, families, staff, volunteers, visitors and property from potential emergencies related to extreme heat or cold caused by an HVAC malfunction.

Procedures

Staff Roles and Responsibilities

FIRE CONTROL OFFICER

- In the event of an HVAC system malfunction or breakdown during business hours contact the Maintenance department /after business hours contact the on call supervisor
- Monitor resident conditions
- COOLING FAILURE-make sure there are cold beverages and snacks for residents and staff- ensure temperature is measured throughout the crisis period as per ministry mandate; set up a cooling area as required
- HEATING FAILURE-make sure there are extra blankets for residents
- Initiate non-emergency evacuation where the temperature becomes a health risk

Power Failure

Policy

Huron Lodge is equipped with a stand-by generator to provide electrical power to critical area in the home during a power failure.

Huron Lodge has identified basic services that will continue to function on the back-up generator.

Procedures

FIRE CONTROL OFFICER

- Delegate staff to check /reset mag-locks and monitor doors
- Determine if the power failure is within the home or affecting the community as well
- Evaluate what areas of the home have power if the failure is in the community contact the utility company to determine the extent and time frame for the outage
- Ensure staff is maintaining essential resident care
- Instruct staff to turn off any non-essential equipment
- Ensure life safety systems are operating

DIETARY STAFF

- Monitor and record fridge temperatures
- Discard any refrigerated food that exceeds 5C

MAINTENANCE

- Determine the cause, extent and time frame for the power failure
- Ensure that the generator is operating and all systems on back up have power
- Check generator fuel levels
- When power returns recheck that all equipment has come back on line/if not reset

STAFF

- If the call bell system is not working resident checks must be completed every 15 minutes

Contingency Plan

1. The following is a list of emergency power items that will continue to operate via back up operator/generator. All listed are as per code:

- Some exterior lighting
- Approximately 1/3 of all corridor and exit routine luminaries
- All stair lighting
- Battery pack in the main electrical room and generator room
- Some lights in dining room, kitchen, telephone room and mechanical room
- All exit lights
- Elevator pit lighting
- Some penthouse lighting
- Enclosed spaces such as tub/shower rooms and Program Activity Rooms will have some luminaries connected to emergency power circuits.
- Fire pump(s) and jockey pump(s) as required
- Excess pressure pump
- Dry pipe sprinkler system air compressor
- Fire alarm system
- Elevators (one & two)
- Smoke exhaust and pressurization fans as required
- Sump pumps
- Receptacles in telephone room for telephone, data and cable TV systems
- Utility room receptacles for charging lift batteries
- Kitchen equipment, walk-in refrigerators and freezer, evaporator coils, condensing units, fire protection system, walk-in freezer alarm, kitchen refrigerator
- Nurse Call System
- Patient Wandering System
- Maglocks as permitted by code.
- Kitchen hood exhaust
- Boilers

- Perimeter heating pumps
- Fridges in medical rooms
- Receptacles in mechanical rooms
- Receptacles in generator room
- Receptacles in electrical room
- Receptacles at reception
- Receptacles in the server room
- Some receptacles in resident corridors
- Emergency generator block heater
- All bathing tubs
- Domestic hot water pumps
- Kitchen make up air
- Kitchen Condensing unit
- Additional assorted plugs

Nursing:

- Nurse call System – is on backup generator
- Lifts – Lifts in progress would be completed by the lift battery capability; residents needing lifts would be transferred on available lift battery power; thereafter, would be transferred on floor.
- Air Mattresses – All air mattresses must be checked.
- Software – Downtime charting would be initiated immediately/MARS copied
- O² – All concentrator O² would be changed to portable O².
- Electrical cords and flashlights are located at security

NOTE: Call Bells – extra nursing rounds would be initiated; residents at risk would be provided with available bed alarms to pull the cord.

Environmental Services:

- Normal operations, unless required in Nursing and Dietary for assistance.

Administration:

- Computers down – Revert to manual and other job functions not reliant on computers.
- Phone Service Down - Report to help Desk for further follow-up. Inform 311 of the system outage and provide an alternative contact number for those who have an urgent need to communicate with Huron Lodge.

Resident Services:

- Activities will be cancelled as required. Resident Services staff may be redeployed within the facility, as circumstances require.

Dietary:

- Software – Downtime charting.
- Nutritional Program –Downtime hard copy charting. Once system up and running downtime charting to be inputted into all programs. Hard copy file goes in charts.
- Power Outage – refer to “Power Outage” Procedure.
- Menus – Regular menu can be utilized.
- Use Paper Products – such as foam bowls, side plates, dinner plates. Continue to use china mugs, glasses and regular silverware
- Serve from Cambro containers.
- Take courses of food out 1 at a time
- Place in steam tables; serve and put back in Cambro container

Water Supply Disruption

Policy

In the event of a water supply disruption adequate drinking water will be provided. Water for hygiene issues will also be addressed.

Procedures

Staff Roles and Responsibilities

DISCOVERING A WATER SUPPLY DISRUPTION

FIRE CONTROL OFFICER

- Contact the Public Works Department
- If the disruption lasts less than 4 hours bottled water will be distributed
- If the disruption lasts over 4 hours non-emergency relocation may be considered
- If the disruption lasts more than 24 hours non-emergency relocation may be considered

MAINTENANCE

- If the disruption lasts for more than 4 hours make arrangements for additional supplies of bottled water
- Portable toilets may be considered for rental

Note: Water supply disruptions can be triggered by a number of reasons:

- Municipal water line failure
- Municipal boil water order
- Irrigation water line failure
- Domestic water line rupture or leak
- On site fire hydrant damage

Air Exclusion

Policy

In an Air Exclusion situation action is taken to ensure contaminated air from outside is restricted from entering the home. All air exchange systems must be shut down to ensure the air inside the building stays uncontaminated.

Procedures

Staff Roles and Responsibility

UPON BEING NOTIFIED OF AN AIR EXCLUSION SITUATION

FIRE CONTROL OFFICER

- Call 9-1-1
- Announce **“CODE GREY-PLEASE CLOSE ALL EXTERIOR DOORS”3 times**
- Ensure the air exchange system is shut down
- Make sure residents return inside
- Account for all residents and visitors
- Assign staff to exits to restrict individuals from going outside
- Monitor residents for breathing difficulties
- Once the air is no longer contaminated announce **“CODE GREY –ALL CLEAR”
3 times**
- Have maintenance personnel turn on air exchange systems

ALL STAFF

- Notify the Fire Control Officer of contaminated air external to the home
- Bring residents inside and close doors
- Turn off exhaust fans including: cooking hoods, dryers in laundry, tub room exhaust fans, and air exchange systems.
- Await further instruction from the Fire Control Officer

NOTE: ALL CODES ARE TO BE REPORTED TO THE ADMINISTRATOR/ON CALL MANAGER

NOTE: THE INTERNAL INCIDENT FORM IS TO BE COMPLETED BY THE FIRE CONTROL OFFICER, & MANAGER AFTER COMPLETION OF THE CODE

Power Outage/Generator Chronological Summary

Code Blue- Medical Emergency

Policy

Registered staff must provide aid for an acute medical emergency involving residents, staff, volunteers or visitors. Staff members that discover a medical emergency anywhere on the property must respond according to this policy.

The P.A system will be used when a Code Blue is activated and resuscitation with the Automated External Defibrillator (AED) is required.

Procedures

Staff Roles and Responsibilities

UPON NOTIFICATION OF A CODE BLUE

RPN (on the unit)

- Page overhead (80) CODE BLUE on the desk phone or FCN 280 on the wireless phones
- Call 9-911 using the wireless phones or on the RHA's phone system
- Inform security at 8508 (wireless) or 8595 (desk phone) the location of the code
- Be specific about the location so security will be able to direct EMS

RPN WILLOW 2:1

- Responds with crash cart to a CODE BLUE on 1st & 2nd floor only
- A crash cart are located in the med room on 2:1

RPN DOGWOOD 4:1

- Responds with a crash cart to a CODE BLUE ON 3rd & 4th floor only
- A crash cart is located in the med room on 4:1

RN

- The RN from the 1st & 3rd floor will respond to the location of the CODE BLUE with the Automated External Defibrillator (AED)
- The AEDs are on wall mounts near the elevators on the 1st and 3rd floors
- RNs are to use the fastest route possible
- The 1st RN is to run the code
- The 2nd RN is responsible for the records of the code
- The RN on the 2nd floor must go to 2:1 if the RPN from that RHA is involved in the code
- The RN on the 4th floor must go to 4:1 if the RPN from that RHA is involved in the code

ALL OTHER REGISTERED STAFF

- Remain on standby alert
- Provide support/reassurance to residents, visitors and staff

UPON DISCOVERY OF A MEDICAL EMERGENCY

ALL STAFF

- Call out "CODE BLUE + LOCATION"
- Contact the RN/RPN

CONTINGENCY PLAN

- RPN carrying the 2:1/4:1 medication keys will respond with the crash cart
- RN covering the 1st or 3rd floor is to respond with the defibrillator

UPON ARRIVAL OF EMS

- The RN will give report and EMS takes charge of the code

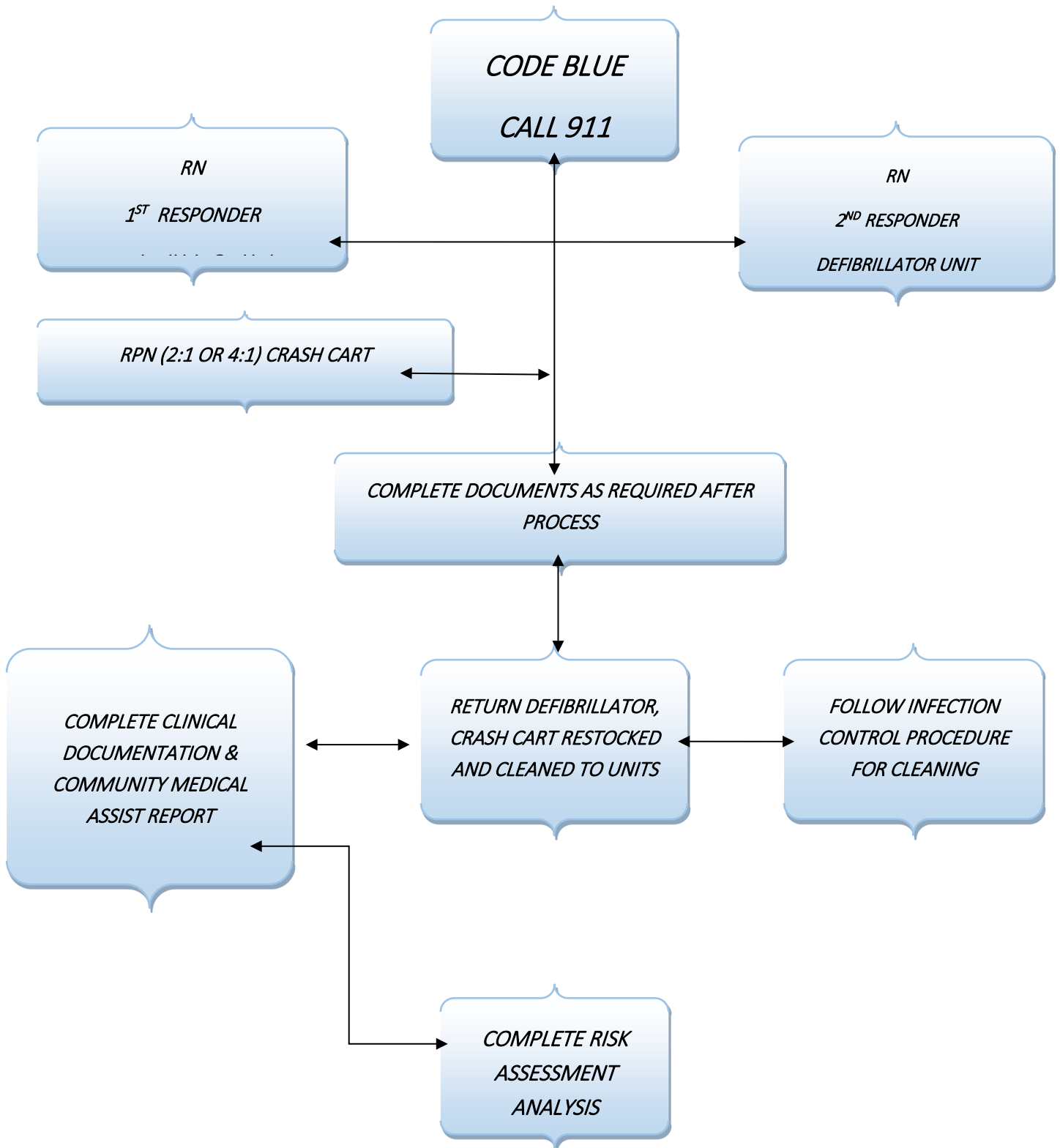
AFTER ALL CLEAR

- Hold a debrief to determine what aspects of the response worked well and what could be improved upon
- Notify families if the code was a resident, staff, or visitor
- Defibrillator unit and crash carts are to be returned to the units clean and restocked
- Team debrief to evaluate how the process worked

NOTE: ALL CODES MUST BE REPORTED TO THE ADMINISTRATOR/ON CALL MANAGER

NOTE: THE INTERNAL INCIDENT FORM IS TO BE COMPLETED BY THE FIRE CONTROL OFFICER, & MANAGER AFTER THE COMPLETION OF THE CODE

CODE BLUE FLOW CHART



Tornadoes

Guide To Understanding Forecasts

Tornadoes are one of nature's most unpredictable and violent quirks, but an understanding of weather warnings and well-thought-out Emergency Plan/Fire Safety Plan can help avoid tragedy. April and May are prime months for tornado activity.

Tornado activity in Michigan does not necessarily mean danger in the Windsor area. The map showing the US States and Counties will help pinpoint tornado activity and its direction. If the map indicates the tornado is close to or heading toward Windsor, that's the time to tune in to local media.

Be aware of the different weather terminology used by U.S. and Canadian forecasters. Canadian weather reports will say **"Severe weather watch with risk of tornadoes"** when severe storms have formed or funnel clouds exist. The U.S. equivalent is a **"tornado watch."** Both Canadian and U.S. forecasts will report a **"tornado warning"** when a tornado has been sighted.

Tornadoes usually approach from the west, are normally associated with a thunderstorm, and often hit in late afternoon. In the event of a tornado, the sky will darken and often become tinged with yellow or green. A roaring noise will be heard.

TORNADO SHELTER SUGGESTIONS

FROM THE OFFICE OF EMERGENCY PLANNING, WINDSOR, ONTARIO

- Stay away from windows, doors, and outside walls. Interior hallways or windowless rooms especially in below grade areas are the best sanctuaries during a tornado.
- The suggested primary tornado shelter locations would be in the basement.
- Large-volume rooms such as the chapel, dining room and community room should be vacated if a tornado appears imminent. If outer windows, doors or walls are penetrated by debris, doors may swing violently and certain hallways could become debris-filled, high-speed wind tunnels. When taking shelter in hallways, leave a clear path for better control and movement.

- Extreme winds are most probable from the west to southwest quadrant. If extreme winds appear imminent, all doors and windows on the windward side must be securely closed.
- Refer to the attached map for normal Tornado travelling path.

WEATHER MONITORING

If the weather reports indicate that severe storms are possible, the RN (Registered Nurse)/Fire Control officer in RHA 1:1 shall monitor weather radios for alerts or bulletins. In the event that Environment Canada issues a **“Weather Alert”** the following steps will then be taken:

1. In the event that the Manager/Supervisor on Call or Alternate hear the alert while monitoring outside of regular hours, they shall telephone Huron Lodge and communicate the alert.
2. If an emergency status is deemed necessary, the telephone call-in list will be implemented accordingly.

WEATHER MESSAGES

SEVERE WEATHER ADVISORY (CANADA)

- Term indicates possibility of heavy winds and hail or rain.
 - Alert all Staff, close all outside doors and notify persons outside of building.

TORNADO WARNING – (USA AND CANADA)

- Term indicates a tornado has been sighted and the location, time, and direction will be given.
 - Alert all Staff, close all outside doors and notify persons outside of building.

UNFAVOURABLE WEATHER CONDITIONS

SEVERE WEATHER WATCH WITH RISK OF TORNADOES (CANADA)

- Term indicates that the development of tornado is possible.

Procedures:

1. Staff should always be alert to the onset of severe weather that may result in a tornado.
2. Watch for warning signs – very high humidity, severe thunderstorms with frequent lightening and extremely dark sky sometimes highlighted by green or yellow clouds.
3. Confirm weather radios are on throughout the facility including all nursing stations (checked by Nursing Environmental rounds). Shrill tone will sound from weather radios when severe weather conditions are present.
4. Turn on television sets throughout building to local channels (CBC, Channel 9, or Cable 16). Tornado watch or tornado warning conditions will be indicated.

TORNADO WATCH

- The Registered Nurse (RN)/Fire Control officer in RHA 1:1to notify building via paging system that we are in tornado watch.

BROADCAST THE FOLLOWING MESSAGE

ATTENTION ALL RESIDENTS, STAFF AND VISITORS

“WE ARE PRESENTLY IN TORNADO WATCH. CONDITIONS ARE FAVOURABLE FOR THE FORMATION OF A TORNADO. PLEASE REFRAIN FROM VISITING THE AUDITORIUM OR CHAPEL. I REPEAT....(REPEAT THREE TIMES).

“DO NOT USE ELEVATORS” (REPEAT THREE TIMES).

1. After Registered Nurse (RN)/Fire Control officer in RHA 1:1 has completed the above broadcast, staff to provide reassurance to resident and reinforce RN's direction.
2. Ensure residents and staff that are outside return inside the facility.
3. Staff to close all windows and inside and outside doors.
4. Staff to ensure no one remains in auditorium and chapel.
5. If possible, refrain from putting residents in bed, in anticipation of tornado warning.
6. Remain on high alert. Watch television and listen to radio for further direction.

TORNADO WARNING

PLEASE NOTE: If a tornado warning is issued, the key focus of concern is to save human lives. Focus immediately on moving all persons to the safest locations of the building, in an orderly fashion. Also, should the electrical power switch to back-up generator, refer to Back-Up Generator Policy and Procedure.

- The Registered Nurse (RN)/Fire Control officer in RHA 1:1 to notify building via paging system that a tornado warning has been issued for our area:

BROADCAST THE FOLLOWING MESSAGE

ATTENTION ALL RESIDENTS, STAFF AND VISITORS

“A TORNADO WARNING HAS BEEN ISSUED. I REPEAT, A TORNADO WARNING HAS BEEN ISSUED, IMMEDIATELY PROCEED AWAY FROM THE EXTERIOR WALLS OF THE BUILDING IN AN ORDERLY FASHION, INCLUDING AUDITORIUM, DINING ROOMS, CHAPEL AND MAIN LOUNGE. GO TO STAIRWELLS AND INNER HALLWAY AREAS. STAFF TO PROVIDE IMMEDIATE ASSISTANCE TO ALL RESIDENTS.”

(REPEAT THREE TIMES).

“DO NOT USE ELEVATORS” (REPEAT THREE TIMES).

1. All staff to immediately assist residents in re-locating away from possible flying glass (windows) and all exterior walls. Attempt to locate all persons to the innermost and lowest level of the building possible, as quickly as able to do so. Areas to re-locate, in order of preference are:
 - Basement (elevators may be used with regular power source/ if on back-up generator, one elevator to be used only, as assigned by Registered Nurse/Fire Control officer in RHA 1:1.
 - Stairwells (especially lowest level stairwells).
 - Inner hallway rooms on all floors (linen rooms, tub rooms, utility rooms)
2. If unable to re-locate as above, go to innermost, lowest level of building closest to you.
3. For residents that cannot be relocated – close curtains in resident room and cover resident completely with blankets.
4. For added protection, cover all persons with blankets, from the head down, to protect from flying debris.
5. Ensure a clear path remains down centre of hallways for emergency personnel ease of access.
6. Continue, as above, until tornado warning has been lifted

TORNADO WARNING LIFTED

- When tornado warning has been lifted via radio and/or television, Registered Nurse/Fire Control officer in RHA 1:1 to notify building via paging system.

BROADCAST THE FOLLOWING MESSAGE

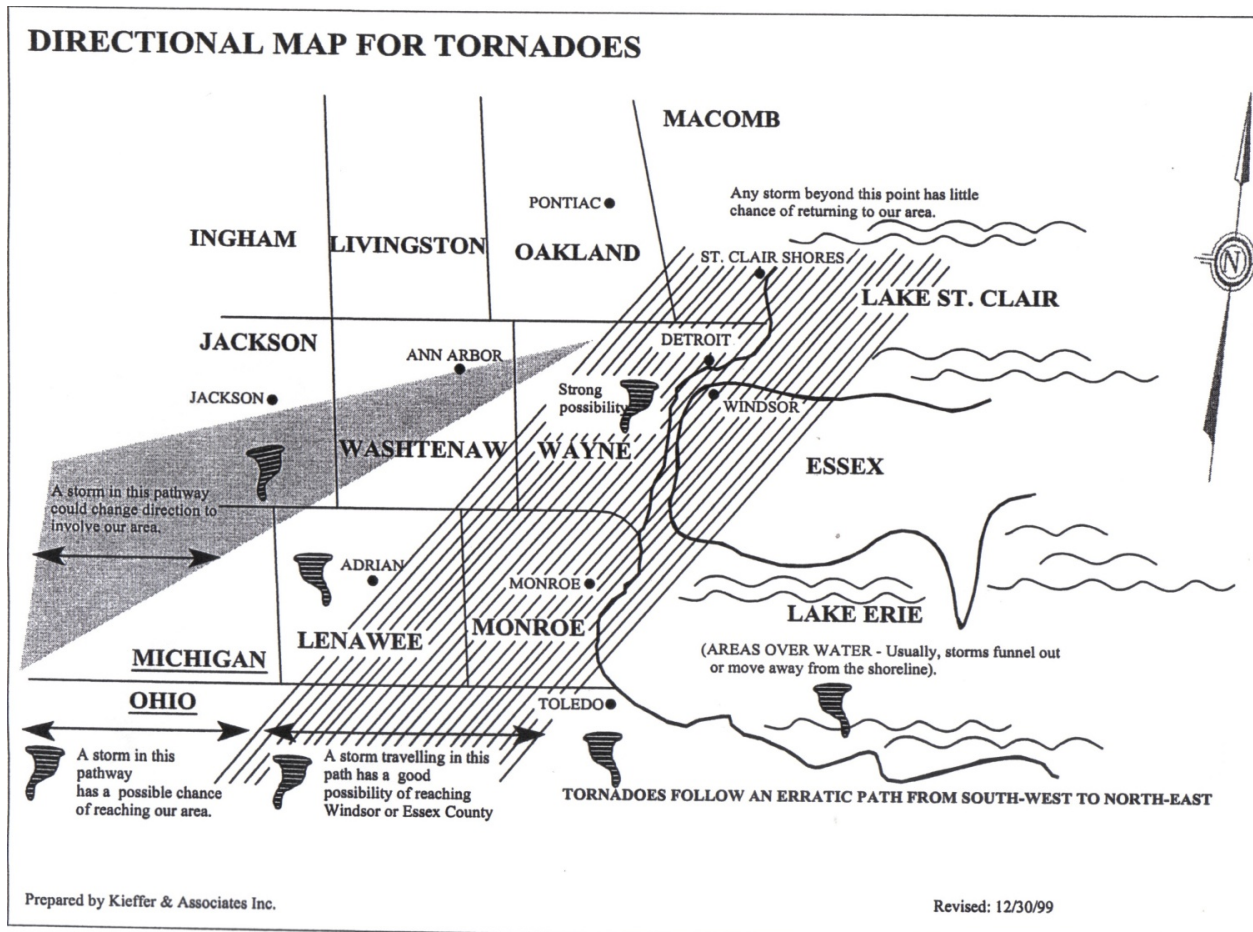
ATTENTION ALL RESIDENTS, STAFF AND VISITORS

“THE TORNADO WARNING HAS BEEN LIFTED. I REPEAT, THE TORNADO WARNING HAS BEEN LIFTED. PLEASE RETURN TO YOUR REGULAR ROUTINES. THANK-YOU FOR YOUR CO-OPERATION THROUGHOUT THE EMERGENCY.”

(REPEAT THREE TIMES).

TORNADO STRIKE PROCEDURE

1. Attend the injured.
2. Do not use matches.
3. Watch for electrical wires and do not touch them.
4. **REMEMBER:** Windsor does have a city-wide disaster plan, and emergency help may be available rapidly. The decision to contact the city emergency services shall be the judgement of the "Supervisor on Call" or the alternate.
5. Under the direction of authorized personnel or your immediate supervisor, move residents to a safe holding area or a safe room.



Floods

Property flooding can occur when least expected. Leaks sewer backup, broken water mains and wide area surface flooding can cause damage. Being prepared for a flooding of any kind can reduce potential harmful effects.

FLOODING PRECAUTIONS:

- 1) Maintain property drainage by sloping grounds away from buildings.
- 2) Prepare plugs for basement drains and make certain sewer backup valves are functioning.
- 3) Test existing sump pumps for quick removal of water.

FLOOD WARNING:

ACTIONS TO BE TAKEN WHEN FLOOD WARNINGS ARE ISSUED:

1. Install plugs in basement drains.
2. Store drinking water in case tap supply becomes contaminated or have a supply of bottled water on hand.
3. Disconnect eaves troughs that drain into the sewer.
4. Remove all chemicals from the basement and move any boxes that could get damaged or contaminated to upper floors or on high shelves.
5. Seek the advice of local municipal authorities if dike building or installing sand bags if necessary. If the facility has been flooded through sewer back up or other flooding turn basement furnaces off.
6. Turn off electrical power if evacuation is necessary.
7. If the area surrounding the switch is wet, stand on a dry surface and reach with a dry wooden stick.
8. Add disinfectant (e.g. bleach) to basement floodwaters every two or three days.
9. If you suspect your drinking water is contaminated, resort to using bottled water for drinking purposes until advised otherwise from authorities.
10. Evacuate you facility as outlined in evacuation procedures.

BEFORE RE-ENTERING A BUILDING:

CHECK THE OUTSIDE OF THE BUILDING:

1. Call the utility company immediately if you find downed power lines or detect gas leaks. (Gas leaks will emit a distinctive odour).
2. Look for external damage.
3. Examine the foundation for cracks or other damage.
4. Look for gaps between the steps and the building.
5. If you see any obvious damage, have a building inspector check the building before you go in.

AFTER ENTERING A BUILDING:

1. Watch your footing carefully. Floors and stairs can be very slippery.
2. Be alert for gas leaks.
3. Do not strike a match or use an open flame when you enter the building unless you know the gas has been turned off and the area ventilated.
4. Use a flashlight to inspect for damage.
5. Turn off the electricity. Even if the power company has turned off electricity to the area.
6. Do not use appliances or motors that have been wet unless they have been taken apart, cleaned and dried.

Outbreaks of communicable diseases

Policy:

Long-Term Care homes are required to have emergency plans in place that comply with regulatory requirements which include measures for preparing and managing emergencies such as outbreaks of communicable diseases, outbreaks of a disease of public health significance, epidemics and pandemics.

Huron Lodge's emergency disease plan is in place to prevent and reduce the transmission of disease amongst residents, staff and visitors, minimize illness and maintain critical operations and services.

The home will follow IPAC protocols and infection control policies during a declared outbreak of communicable disease as well as all written directions from local, provincial and national authorities to ensure the health and safety of all residents and staff.

Upon notification from local, provincial, federal or international authorities that an official outbreak of communicable disease has been declared, the Administrator or designate will convene the Outbreak Management Team and advise the Corporate Leadership Team accordingly.

Procedure:

The following plan has been broken down in phases, mitigation/prevention, preparedness, response and the recovery phase. The home will ensure regular review of the plan occurs with yearly testing to identify gaps in skill or planning weaknesses and improve performance.

Mitigation/Prevention

- Ensure IPAC policy and procedures are up to date and consistent infection control prevention and control measures are occurring
- Promote safe work practices through hand hygiene programs
- Implement staff daily symptom self-monitoring
- Promote and offer annual influenza, COVID-19 and pneumococcal vaccines for residents and staff
- Optimize environmental cleaning programs
- Develop baseline data for infection control monitoring throughout the year and monitor for increases
- Ensure compliance with City of Windsor mandatory vaccination policy for all staff
- Ensure compliance with City of Windsor Health and Safety policies and procedures

Preparedness

- Ensure all staff, students, volunteers, caregivers, visitors are aware of signs & symptoms of the circulating infection
- Ensure all staff are mask fit tested upon hire and every 2 years thereafter unless staff have had a significant physical change (i.e. Weight loss/gain)
- Keep a 6 week stock piling of PPE in alignment with the established burn rate
- Increase food, incontinence products, medical supplies, disinfecting agents on hand
- Safeguard all supplies and develop distribution plan to units
- Review staffing levels with enhancement of temporary staff or redeployed staff members
- Develop strong relationships with community partners such as Ontario Health Teams, Public Health, hospital leadership, Infection Control Hubs for information sharing and problem solving
- Discuss with suppliers about ability to deliver in a public health emergency and develop contingency plans. Explore alternative suppliers that can assist in the event of supply chain disruptions. Suppliers include pharmacy, oxygen providers, food providers, medical supplies, incontinence items, assistive devices etc.,
- Participate in partnership with other long term care homes through Advantage Ontario, Ontario Long Term Care Association and local Facility Operators Group meetings
- Provide education and promotion on the importance of immunizations such as influenza, COVID-19, training on IPAC measures inclusive of self-screening, respiratory hygiene, handwashing
- Maintain up to date contact lists for staff and resident families/next of kin/power of attorney in Everbridge communication system
- Complete inventory and purchase additional information technologies such as IPADs, cell phones, computers, batteries and chargers, walkie talkies,
- Develop communication plan for Huron Lodge website, hard copies at the door and voicemail system to be used on the beginning of the emergency, when there is a significant change, and when the emergency is over
- Maintain a system for authorization of caregivers in alignment with the Fixing Long Term Act
- Ensure an active surveillance process of collecting, analyzing and interpreting data is in place and monitored daily
- Review resident care needs for residents that may be discharged to family members and open dialogue with those residents/families
- Complete an assessment of resident resource needs and plans of care
- Determine process for transfer to hospital in conjunction with transportation agencies/EMT
- Discuss process for body removal with funeral homes
- Work in conjunction with the LHIN to set up 14 isolation beds within the home to be used where required for resident cohorting. Number of isolation beds should be updated in accordance with the severity of the disease and transmission
- Involve pharmacist and physicians for determination of medications that can be placed on hold for each resident

- Review contingency plans in each division for as it relates to resident care (See Huron Lodge Pandemic Planning COVID-19)
- Develop a plan to streamline orientation program for new hires to involve education specific to their job duties during a disease outbreak and ensure is in alignment with any Ministry of Health adaptations to training programs
- Ensure all managers and delegates are trained equally and aware of all directive and guidelines
- Cross train staff for essential job duties
- Discuss preparedness plans at union management meetings
- Share contingency plans with resident council

Response

- Administrator or designate is to convene the outbreak management team immediately and establish daily meetings
- Implementation of all directives/guidelines from Ministry of Health and Public Health will occur
- Implement staff unit cohorting for scheduling and call ins. Full time and part time staff will be assigned to one unit. Straight time and overtime call ins will occur from that group of staff in an established rotational process to promote resident consistency. (See Outbreak Scheduling Procedure)
- Implement resident cohorting for well, ill and diagnosed residents. Each unit will have designated isolation rooms that will be used for cohorting per unit. A review of clusters on home units will determine the movement of residents. Residents will be moved to isolation rooms based on enhanced testing and symptomology.
- Symptomatic residents will be immediately isolated with the appropriate infection control precautions in place. Residents meeting the case definition of the outbreak will be line listed and reviewed each shift by registered staff for symptom management. Oversight of residents on the line list or those with symptoms will occur daily by the IPAC lead or designate.
- Designate break rooms, visitation areas
- Lock all doors to the home and limit access to front door only for essential staff, contractors, caregivers and residents. Unit staff leaving the home are to exit through Chapel door which will be unlocked by security at the end of each shift
- Implement all screening and testing requirements at the front door immediately upon entrance
- Increase social distancing in common areas, elevators and staff lunch rooms
- Provide socially distanced dining for all residents that require assistance or total feeding. Residents assessed by the dietician to safety eat in their rooms can do so with hallway monitoring by staff
- Discontinue group activities and move to unit based or 1:1 sessions
- Implement staff, caregiver and resident symptom monitoring
- Post required signage at front door and on care units
- Establish daily meetings of the outbreak management team

- IPAC lead to liaise daily with Public Health
- Communicate to staff, via email system, rounds
- Notify families/caregivers through signage, Everbridge communication
- Notify residents through unit rounds, overhead PA, use of resident services staff
- All staff with symptoms matching the line list are to contact the Director of Care or designate. These staff will be placed on the staff line list upon screening and will be advised to follow corporate processes for accident/incident reporting and WSIB if required. Involve Corporate H&S for reporting requirements of ill staff to Ministry of Labor
- Cancel all non-essential resident appointments
- Provide educational material for caregivers upon entrance to home on handwashing, donning and doffing PPE and any other relevant IPAC measure
- Ensure hand hygiene supplies (ie. Soap and hand sanitizer) are restocked frequently
- Offer residents masks, promote and complete hand hygiene
- Oversight through use of audits of hand washing, PPE donning and doffing, equipment disinfection, risk assessment reviews,
- Report and update the Critical Incident System any disease outbreak as defined in the Fixing Long Term Act and its regulations within the established time lines
- Training refresher on IPAC protocols for cleaning and disinfecting, hand washing, PPE use, point of care risk assessments, respiratory etiquette and contract/droplet/airborn transmission and precautions
- Admissions, transfers and discharges from the home will be in alignment with Ministry of Health directives and Public Health guidance
- All persons entering the home must complete either an online or hard copy screening tool and participate in rapid test surveillance testing. Any person that fails screening or has a positive test is required to immediately leave the home. Staff are required to follow internal reporting requirements (See Staff Screening). Caregivers, visitors or support workers that fail screening or have a positive rapid test are required to leave the home and contact their medical professional or public health.

Recovery—in consultation with Public Health and in a phased in manner

- Communicate with residents, caregivers, visitors and staff on de-escalation plan
- Restore communal dining for both residents and staff
- Resume group activities on units and in auditorium
- Initiate admissions into the home and readmit any resident that was discharged to family in accordance with governing requirements
- Return residents that were cohorted back to their original rooms
- Return to normal staffing routines and contingencies
- Reinstate all normal functions of the home
- Complete financial reconciliations
- Update Critical Incident System to Ministry of Health
- Complete a debrief with staff, residents and caregivers upon the completion of the emergency for lessons learned

Outbreak Management Team

Consists of:

- Medical Director
- Pharmacist
- Administrator
- Director of Care
- IPAC Lead
- Director of Resident Services
- Director of Dietary Services
- Manager of Resident and Corporate Services
- Assistant Director of Care
- Clinical Care Supervisor
- Supervisor of Facilities
- Contracted Environmental Services Manager
- Public Health Lead

Upon convening of the Outbreak Management Team, the following will be discussed at a minimum at each daily meeting:

Administrator

- Updates from MOH or PHU on directives or guidelines
- Communications to residents, families and staff
- Review and designate duties from the response phase still to be implemented
- Difficulties encountered
- Lessons learned

Director of Care

- Staff and resident cohorting
- Staff contingency plan
- Staff illnesses meeting case definition, status of Test to Work
- Admissions, re-admissions, hospitalizations, end of life care, deaths
- Education for caregivers, staff

IPAC lead

- Update from daily communication with Public Health
- Surveillance and monitoring
- Case definition, onset date, symptoms and location of each resident
- Lab specimens to be collected and any results received
- Immunization rates of residents and staff
- Review of units in isolation, equipment need

Director of Resident Services

- Activities for residents
- Residents/Families with psychosocial difficulties

Director of Dietary Services

- Residents with increased dietary risk identified
- Food supply updates

Assistant Director of Care

- Audits and monitoring results
- Staff difficulties

Clinical Care Supervisor/Supervisor of Facilities

- PPE and lab supplies

Contracted Environmental Services Manager

- Review of cleaning processes

Essential Services Identification

During a disease emergency, it is expected that staff absenteeism will result in focusing on the delivering of essential services only. There will also be a requirement to limit access to the home to only essential personnel and caregivers to limit the spread of infection.

The following outlines key personnel and service delivery

Key Personnel

- Management team of Huron Lodge
- All Nursing staff
- All contracted environment services staff
- All dietary staff inclusive of dietician
- Nursing and Dietary Timekeeper
- Supervisor of Attendance and Scheduling
- All Resident Services staff
- Staff Development Coordinator
- Contracted security staff
- Clerical supports to key personnel
- Screeners

Services that MUST be maintained to provide care and protect resident health	-Life maintaining medications and treatments -Basic bathing, peri care and mouth care -Changing of linens as needed only -basic laundry services -dietary services for fluids and nutrition -enhanced infection control cleaning and disinfection
Services that can be reduced or curtailed	-Physiotherapy

	<ul style="list-style-type: none">-Occupation Therapy-Outside resident appointments-Recreational activities-Hairdressing-Foot care for non diabetic residents-Personal laundry
Outside services scheduled to come in that are essential and those that can be postponed or provided remotely	<ul style="list-style-type: none">-Pastoral care-Oxygen therapy-End of life support-Building emergency repairs-Lab technicians-Doctors/Nurse Practitioner